# LOS ANGELES FIRE COMMISSION

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September 5, 2017

Honorable Members of the City Council City of Los Angeles City Hall, Room 395 Attn: City Clerk Honorable Eric Garcetti Mayor, City of Los Angeles Room 303, City Hall Attn: Mandy Morales, Legislative Coordinator

[BFC 17-102] – KAISER PERMANENTE PARTNERSHIP TO CREATE ADDITIONAL ADVANCED PROVIDER RESPONSE UNITS (APRUS)

At its meeting of September 5, 2017, the Board of Fire Commissioners approved the Kaiser Permanente Partnership to create additional Advanced Provider Response Units report and its recommendations. The report is hereby transmitted concurrently to the Mayor and City Council for consideration and approval.

Should you need additional information, please contact the Board of Fire Commissioners' office at 213-978-3838.

Sincerely,

Isela Iñiguez

**Acting Commission Executive Assistant** 

Attachment

cc: Board of Fire Commissioners (without attachments)
Fire Chief Ralph M. Terrazas (without attachments)



August 24, 2017

BOARD OF FIRE COMMISSIONERS FILE NO. 17-102

TO:

**Board of Fire Commissioners** 

FROM: / Ralph M. Terrazas, Fire Chief

SUBJECT:

KAISER PERMANENTE PARTNERSHIP TO CREATE ADDITIONAL

ADVANCED PROVIDER RESPONSE UNITS (APRUS)

FINAL ACTION: Approved Approved w/Corrections Withdrawn Denied Received & Filed Other

#### SUMMARY

The Los Angeles Fire Department (LAFD) Advanced Provider Response Unit (APRU) is a safe, effective, and innovative model to intervene with patients earlier in their course of emergency care, prevent unnecessary Emergency Department (ED) visits, provide transport to alternative destinations, and refocus prehospital encounters to identify unmet needs and link patients to primary and preventative care. The EMS Advanced Provider's broader scope of practice opens the door to more advanced out-of-hospital care delivery, including immediate treatment and release, medical clearance, and patient navigation to non-emergent medical and non-medical services. Public-private partnerships funding additional APRUs would leverage the resources of community health partners and payers with the expertise and community presence of the LAFD in order to help patients get the right care at the right time at the right location. Kaiser Permanente has provided a donation of \$200,000 to the Fire Foundation for this purpose.

Annual full cost recovery for an EMS AP position is \$274,416 (\$165,723 for salary and benefits + \$108,693 for indirect costs). The Kaiser Permanente donation of \$200,000 would provide full cost recovery for approximately nine months. The Department will request resolution authority for an EMS Advanced Provider position through June 30. 2018. Assuming the position is filled beginning October 1, 2017, the donation would cover the cost of the positon through the end of the Fiscal Year. The Department intends to include continuation of the resolution authority in its Fiscal Year 2018-19 Budget Request.

## RECOMMENDATIONS

That the Board:

- 1. Approve this report and forward to the Mayor and City Council.
- 2. Request that City Council, subject to approval of the Mayor:
  - (a) Authorize the Fire Chief, or his designee, to accept a donation of \$200,000 from Kaiser Permanente through the Fire Foundation for the EMS Advanced Provider Program.
  - (b) Authorize the Fire Department to deposit the donation into Fire Department Trust Fund No. 848, Department 38.
  - (c) Authorize the Controller to:
    - (i) Establish an appropriation account titled EMS Advanced Provider Program, account number to be determined (TBD), within Fund 848/38 for the disbursement of the EMS Advanced Provider Program funds;
    - (ii) Transfer appropriations from Fund 848/38, Account TBD, EMS Advanced Provider Program to Fire Department Fund 100/38, Salaries General Account 001010 for reimbursement of General Fund costs as needed and directed by the Fire Department for the salary of the EMS Advanced Provider and related costs.
  - (d) Authorize resolution authority for one EMS Advanced Provider (Code 2341) in the Fire Department, through June 30, 2018.
  - (e) Authorize the Fire Department to make any technical adjustments, subject to the approval of the CAO, to comply with the intent of Council action on this matter, and authorize the Controller to implement the instructions.

# **FINDINGS**

The LAFD is the largest provider of acute, unscheduled medical care in Los Angeles, responding to over 350,000 incidents in 2015, a 7.8% increase from 2014. This increase is due in part to growing numbers of newly insured low acuity 911callers, 911 frequent users, and an increasing homeless population, many of whom have primary mental health issues.

Patients arriving to the hospital by 911 with low acuity medical problems or patients requiring simple medical clearance tend to get additional testing in the ED, use of more hospital resources, and increase overall ED length-of-stay and an increase in resultant ambulance wall-time. Innovative solutions are clearly needed in order to identify, treat and navigate these patients to more appropriate clinical sites outside of the hospital and providing alternative transport than using ambulances, while simultaneously providing linkage to ongoing care and culturally-sensitive health teaching.

In January 2016, LAFD launched the Nurse Practitioner Response Unit: a converted ambulance with modern point-of-care testing and patient referral capabilities, operated the team consisting of an experienced Advanced Provider (Nurse Practitioner or Physician Assistant) and Firefighter/Paramedic. Advanced Providers have a broader scope of practice, can function autonomously, have training in health promotion and recognizing social determinants of health, and can treat/release patients on scene. The APRU's specific missions include:

- 1. **MOBILE URGENT CARE:** The APRU augments standard deployment of 911resources to patients with low-acuity conditions, offering on-scene evaluation,
  testing, medication, immediate care and referral for follow-up. Those patients who
  receive APRU care may be treated and released on scene and can be referred to
  follow-up with their doctor or clinic.
- 2. COMPREHENSIVE ASSESSMENT OF EMS SUPER USERS: The APRU proactively engages EMS super users (patients with chronic or accelerating use of 911), offers a needs assessment and refers patients to Partners in Care a non-profit organization that specializes in linkage to care. Partners in Care has a health coach visit the patient within 24 hours free of charge, performs a psychosocial assessment, has a pharmacist reconcile their mediations, and a dedicated social worker who helps craft a coordinated care plan in concert with the patient's primary care provider.
- 3. **MEDICAL CLEARANCE OF SELECT MENTAL HEALTH PATIENTS:** Patients with primary mental health complaints who meet certain criteria are medically cleared by the EMS Advanced Provider on scene, and then transported directly to a psychiatric urgent care thus obviating the need for lengthy ED stays and placement from the ED.
- 4. MEDICAL CLEARANCE OF SELECT INEBRIATED PATIENTS: Patients who are publically inebriated, particularly the serial inebriates, who meet specific clinical criteria will be medically cleared by the EMS Advanced Provider on scene, and then transported directly to the DHS Sobering Center. At the Sobering Center, these patients can be placed into detox and transitional housing. This will decrease the need for costly and repeated ambulance transport to the EDs without any plan to address the patients' additions.

## PUBLIC-PRIVATE PARTNERSHIPS TO AUGMENT THE LAFD NPRU PROGRAM

Partnering with healthcare organizations who already have the infrastructure and relationships established within each neighborhood will allow the LAFD to leverage its prehospital infrastructure together with existing local resources to help get patients the care they need. Healthcare organizations, such as individual hospitals, hospital systems or insurance providers, would provide the Fire Department with funding for an LAFD-employed EMS Advanced Provider, while LAFD would provide the specialized ambulance, paramedic, and medical oversight. The APRU would pursue its mission of

providing care for the entire community, regardless of a patient's insurance status. Both public and private entities would work together to create mechanisms of referral for APRU patients that would be unique to that specific community.

# BENEFITS OF PUBLIC-PRIVATE PARTNERSHIP

The benefits of private sponsorship of these unique LAFD resources would be numerous:

Private healthcare sponsors funding APRUs for their community would see:

- · More efficient selection of patients for emergency department care
- Decreased ED overcrowding
- Redirection of care to more cost-effective sites
- Pride in contributing to improved streamlining of care for all members of their community

## Benefits to Local constituents include:

- Low-acuity 911-callers would get more timely care with an emphasis on health teaching and re-enforcing a patient's care with their primary care provider
- LAFD, with its geographic view of 911-frequent users around Los Angeles and unique ability to visit and understand a patient's home setting, would be able to reach out to these vulnerable adults and link them to much needed multidisciplinary resources

#### Benefits to LAFD include:

- The APRU will free up resources in busy sectors of the City by offering immediate treatment, thus obviating the need for transport and delayed ED handoffs.
- LAFD members, by summoning the APRU to high-utilizers, would be able to play an active role in addressing root causes of 911-dependence, helping them to truly fulfil their mission of protecting the health of LA's population.

# Benefits to the City of Los Angeles:

 Establishes new model of cost-effective deployment of additional resources by sharing the cost with local healthcare partners

#### FISCAL IMPACT

Annual full cost recovery (direct and indirect costs) of an EMS Advanced Provider position totals \$274,416 (\$165,723 for salary and benefits + \$108,693 for indirect costs). Kaiser Permanente's donation of \$200,000 to the Los Angeles Fire Foundation would reimburse the City for approximately nine months funding of the position. There would be no General Fund impact assuming the position is filled effective October 1, 2017.

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The LAFD will absorb the cost of one Firefighter/Paramedic position to be assigned to partner with the Advanced Provider. The costs of medical supplies and the ambulance are included in the indirect costs of the Advanced Provider position.

Board Report prepared by Marc Eckstein, M.D., Medical Director, Commander, EMS Bureau.