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January 16, 2018



SUE STENGEL INDEPENDENT ASSESSOR

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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 17-139] – PROVIDENCE HEALTH AND SERVICES PARTNERSHIP TO CREATE ADDITIONAL ADVANCED PROVIDER RESPONSE UNITS (APRUS)

At its meeting of January 16, 2018, the Board of Fire Commissioners approved the 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) December 5, 2017

BOARD OF FIRE COMMISSIONERS FILE NO. 17-139

TO:

Board of Fire Commissioners

FROM: (M)

Ralph M. Terrazas, Fire Chief

SUBJECT:

PROVIDENCE HEALTH AND SERVICES 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FINAL ACTION: Approved — Approved w/Corrections — Withdrawn — Denied — Received & Filed — Other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.

Providence Health and Services (Providence) has provided a donation of \$320,000 to the Los Angeles Fire Foundation to support the implementation of two (2) new APRUs in the San Fernando Valley. The Fire Foundation net donation to the City is \$316,500, which deducts an administrative fee of \$3,500 from the amount donated by Providence. Annual full cost recovery for an EMS Advanced Provider (AP) position is \$274,416 (\$165,723 for salary and benefits plus \$108,693 for indirect costs). The net donation of \$316,500 from the Fire Foundation will cover the salaries and benefits of two EMS AP positions for approximately 11 months. The Department will request resolution authority for two EMS AP positions from February 2018 through January 2019. The Department intends to include continuation of the resolution authorities in its FY 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 net donation of \$316,500 from Providence Health and Services (Providence) 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 Providence, 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, EMS Advanced Provider Program Providence, Account TBD, 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 one EMS Advanced Provider (Code 2341) position on resolution authority to the Fire Department from February 1 through June 30, 2018, subject to allocation by the Civil Service Commission.
 - (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 911 callers, 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 (NPRU): a converted ambulance with modern point-of-care testing and patient referral capabilities, operated the team consisting of an experienced AP (Nurse Practitioner or Physician Assistant) and Firefighter/Paramedic (FF/PM). APs 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:

- 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 AP 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 publicly inebriated, particularly the serial inebriates, who meet specific clinical criteria will be medically cleared by the EMS AP on scene, and then transported directly to the Department of Health Services (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 AP, 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 ED 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 Los Angeles'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 of an EMS AP position totals \$274,416. The net donation to the City of \$316,500 from Providence Health and Services through the Los Angeles Fire Foundation would reimburse the City for approximately 11 months funding of salary and benefits costs for two AP positions. It is anticipated that these two APRUs will be implemented in February 2018. There will be no General Fund impact in FY 2017-18 for the two AP positions or for the two FF/PM positions to be assigned to partner with the APs as costs will be absorbed within the LAFD Budget. The costs of medical supplies and the ambulances are included in the indirect costs of the AP positions.

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