



El Cajon Community Care Nurse Navigation Pilot Program

April 27th, 2023

El Cajon Community Care

- Developed as a partnership between:
- The City of El Cajon
- American Medical Response
- Global Medical Response / Access2Care
- Heartland Fire and Rescue



NURSE NAVIGATION

911 callers with low acuity complaints can be managed outside of the traditional EMS response system

- Started in 2018 with Washington D.C. and currently utilized across the country in 20+ urban and rural settings
- Provides right care with the right resource at the right time
- Keeps critical first responder & ED resources available for life threatening emergencies
- Expands access to care for underserved populations while keeping all patients in-network and enhancing patient experience

Nurse Navigation Programs

14 States
 25 Systems
 7 million lives
 80,000+ calls navigated



911 Nurse Navigation Innovators

- 2018
Washington, DC
- 2020
Alexandria, VA
DeKalb County, GA
- 2021
Sumter, FL
- 2022
Rochester, NY
Seattle, WA
Wake County, NC
Knoxville, TN
Onondaga County, NY
Henry County, GA
Pueblo, CO
Buffalo, NY
Boulder, CO
Longmont, CO
Aurora, CO
Teller County, CO
Fremont County, CO
- 2023
El Cajon, CA
Waco, TX
Santa Rosa County, FL
- 2023 Scheduled
Shawnee County, KS
Vancouver, WA
Jackson, MS
Lauderdale County, AL
Oneida County, NY

NURSE NAVIGATION

CONTINUUM OF CARE APPROACH WITH ALTERNATIVE DISPOSITIONS

Patients, first responders, providers, payors and the community benefit from the integrated Nurse Navigation solution

Expand Access

- ▶ Non-ED healthcare options
- ▶ Maintain in-network payor status
- ▶ Support transportation needs
- ▶ Frequent 911 caller engagement (community paramedicine, mobile integrated healthcare services)

Care Coordination

- ▶ Connection to primary care providers
- ▶ Enrollment / education on health plans
- ▶ Patient-centered care approach for routine and chronic health needs
- ▶ Align primary care, specialists, mental health, pharmacy, home health, and community support

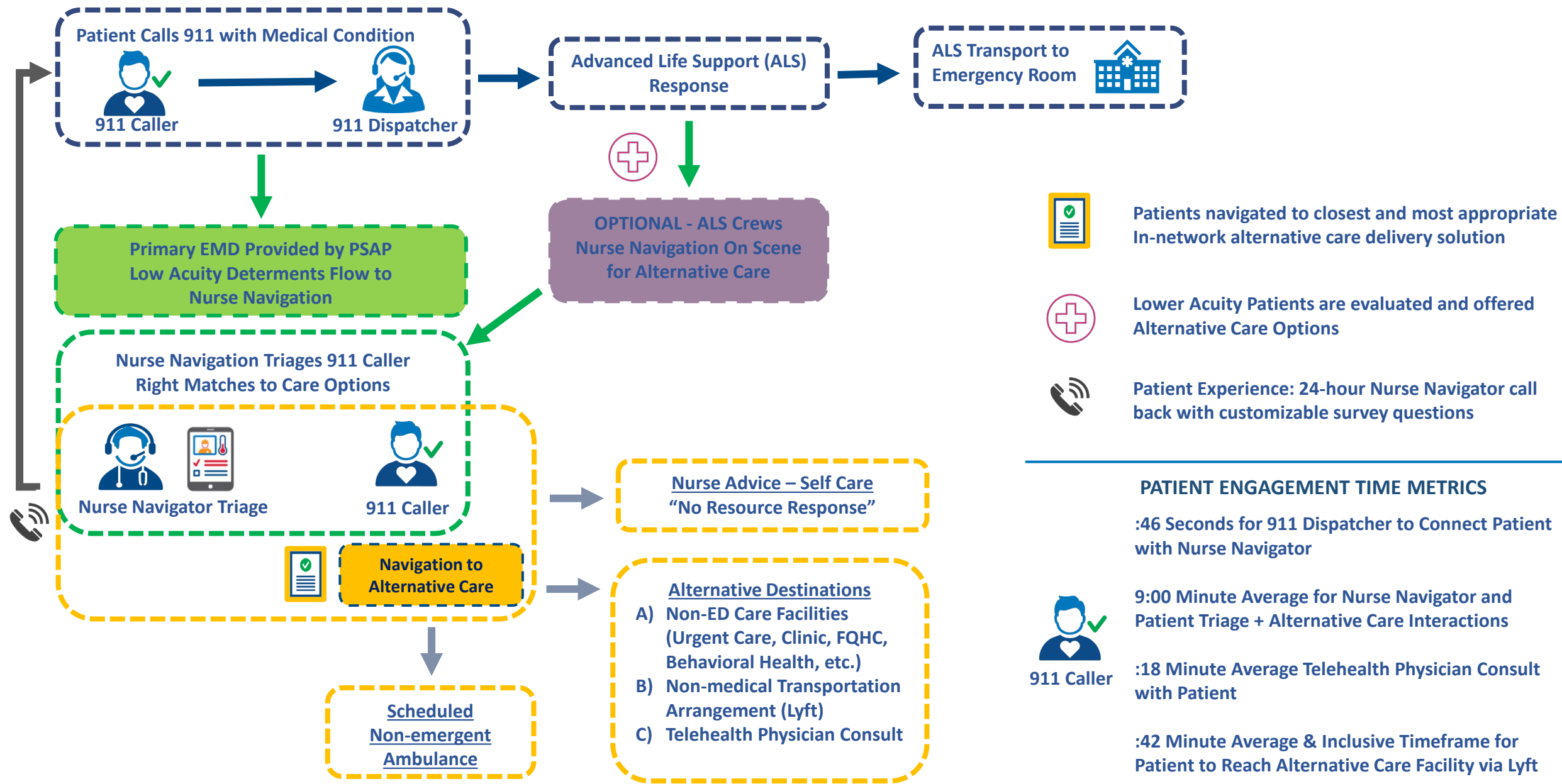
Quadruple Aim Alignment

- ▶ Improved outcomes, access and population health
- ▶ Reduced cost of care
- ▶ Enhanced patient experience
- ▶ Improved caregiver satisfaction

Clinical Determinants

- El Cajon Community Care started with a conservative list of 52 Alpha and Omega MPDS ProQA determinants (out of >1800 possible determinants across all levels)
- Determinants were selected in consultation with CoSD EMS and AMR SMEs and Medical Directors
- Ability to expand determinant set list in future once program is well-established

NURSE NAVIGATION – SOLUTION OVERVIEW



Patients navigated to closest and most appropriate In-network alternative care delivery solution



Lower Acuity Patients are evaluated and offered Alternative Care Options



Patient Experience: 24-hour Nurse Navigator call back with customizable survey questions

PATIENT ENGAGEMENT TIME METRICS

:46 Seconds for 911 Dispatcher to Connect Patient with Nurse Navigator

9:00 Minute Average for Nurse Navigator and Patient Triage + Alternative Care Interactions



:18 Minute Average Telehealth Physician Consult with Patient

:42 Minute Average & Inclusive Timeframe for Patient to Reach Alternative Care Facility via Lyft

Nurse Navigators

- Primary Call center located in Lewisville, TX, with nurses also working remotely throughout the country
- All nurses licensed in the states from which the calls they answer are placed
- Nurses work under the **Needs Matched Time and Appropriate Resource Allocation** protocols
- **NMTARA** contains 212 pathways and is similar to EMD process
- Assigns a time frame and location recommended for care

NMTARA Levels

- **EMR** (Emergency) - results in an ambulance sent to transport to the ED
- **Level 1** - Recommendation to receive treatment at an Urgent Care within an hour
- **Level 2** - Recommendation to receive treatment at an Urgent Care within 4 hours
- **Level 3** - Recommendation to receive treatment at an Urgent Care or physician clinic within 12 hours
- **Level 4** - Recommendation to receive treatment at an Urgent Care or physician clinic within 24 hours
- **Level 5** - Recommendation to receive treatment at an Urgent Care or physician clinic within 5 days (we send to a clinic or physician office the next business day)

- Some NMTARA Level 1 – 5 patients get routed back to AMR for BLS ambulance dispatching
 - ▶ Communicable diseases, non-ambulatory, bariatric, not appropriate for Lyft and no access to other transportation

Nurse Navigator Workflow



- Nurse clinically triages caller
- Nurse has access to Alternative Destinations / Dispositions available in East County
- Nurse right-matches patient insurance with ADs equipped to provide right level of care for complaint and NMTARA level
- Nurse schedules Lyft /BLS transport as needed
- Nurse schedules MIH visit or telemedicine appointment if applicable
- Nurse pre-alerts Alternate Destination of patient's arrival if AD is appropriate disposition
- Nurse provides self-care advise when appropriate


Nurse Navigation

Dashboard Examples

- Example email alert for inbound patient (below)
- Summary report from portal (right)

New Incident - 1169985

 amrlogisnotif@amr.net <amrlogisnotif@amr.net>
To  Edmondson, Lisa

 4:55 PM

DispatchHealth,

We have referred a patient to DispatchHealth from 911 Nurse Navigation. Please log into your web portal for more information at <https://nursenavigationportal.gmr.net/Account/Login>.

Incident Address:

Nurse Navigation
855-434-9301

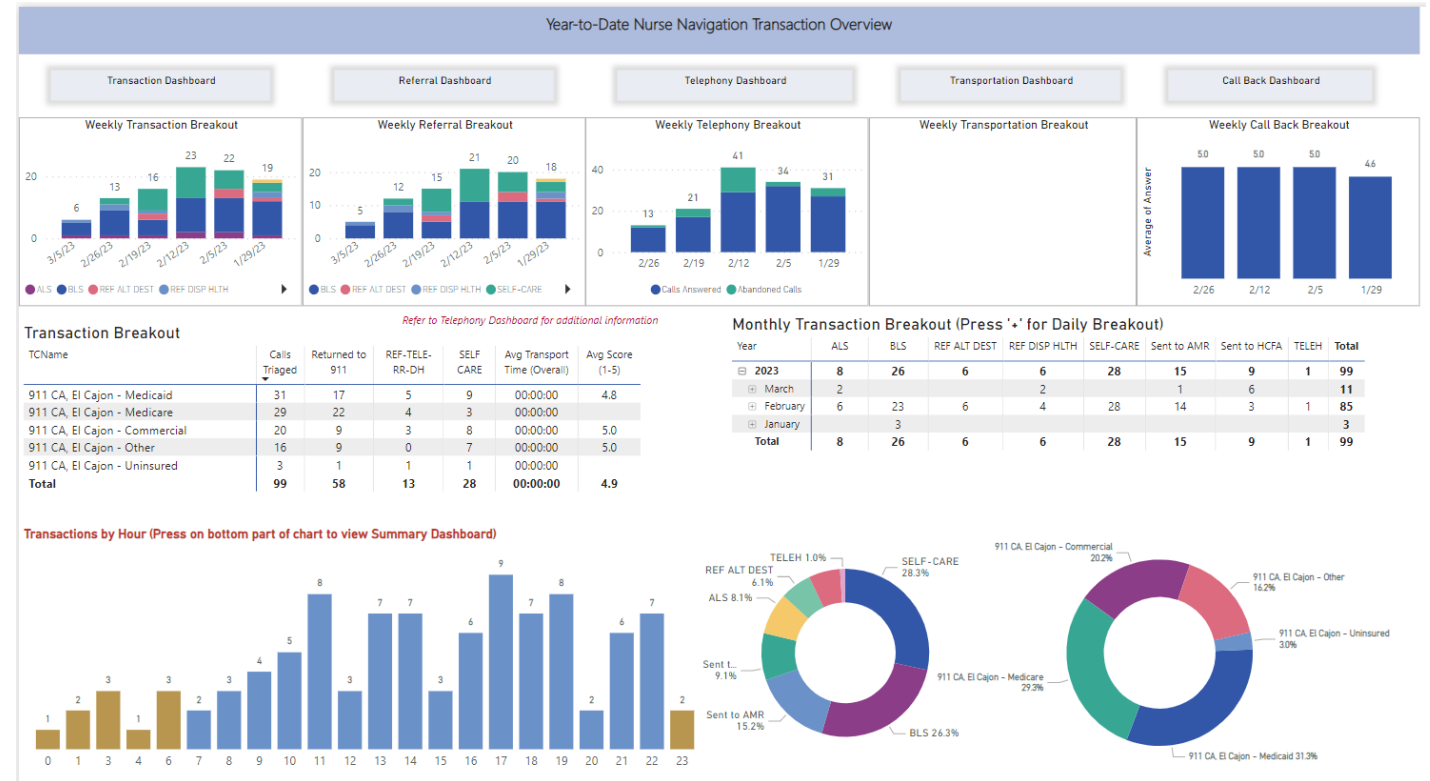
Patient Name	test zztest
Date of Birth	01/01/1990
Call Status	Created
Created Time	Mar 25, 2021 09:47
Planned Arrival Time	Mar 25, 2021 11:00
Incident address	<IncidentAddress>
Details	
Patient Address	null,null,null,null
Phone Number : Home	999-999-9999
Mobile	
Work	
Contract Name	DCFEMS - FFS
Applicants Name	
Applicants Phone	
Chief Complaint	
NAMTARA Level	DCP.1.05 - DC Payer Contracts, DCFEMS - FFS (Medicaid)
Nurse Journal	Means of Communication: Patient Called Command Center, Note: Caller has had three days of ankle swelling with no injury notes., Disposition: Clinic Referral,
Payer	Referred - FFS
Tags	
IncidentId	1091417

El Cajon Community Care

Power BI Reporting

- Customizable Power BI Reporting

- ▶ Patient Satisfaction Scores
- ▶ Telephony Report
- ▶ Transaction Break-out
- ▶ Patient Demographics



El Cajon Community Care

Ongoing Management

- QA review of calls
- Monthly stakeholder Joint Operating Committee meetings
- Tracking and trending of all data points
- Tracking and trending of patient and AD partner feedback
- On-going alternate disposition partner recruitment



Questions?

