



## Legislation Text

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Recommendation to authorize City Manager, Fire Department, Health Department and all other appropriate departments to work together and report back in 120 days on the potential costs, benefits and challenges in forming a Long Beach Community Paramedicine Program. (District 5)

Community Paramedicine (CP) is an innovative and evolving model of community-based healthcare designed to provide more effective and efficient services at a lower cost. Community Paramedicine allows paramedics to function outside their traditional emergency response and transport roles to help facilitate more appropriate use of emergency care resources while enhancing access to primary care for medically underserved populations.

Community Paramedics are licensed paramedics who have received specialized training in addition to general paramedicine training and work within a designated Community Paramedicine program under local medical control as part of a community-based team of health and social services providers. Paramedics are uniquely positioned for expanded roles as they are trusted and accepted by the public; are trained to make health status assessments; recognize and manage life-threatening conditions outside of the hospital; and operate under medical control as part of an organized, systems approach to care.

In 2015, the California Emergency Medical Services Authority (EMSA), working in partnership with the California Health Care Foundation (CHCF) conducted 13 Community Paramedicine pilot projects in a dozen California locations over a two-year period to test and evaluate new or expanded roles for paramedics along with healthcare delivery alternatives. The projects focus on providing services where access to healthcare is limited or when a short-term intervention is needed.

Under the pilot, community paramedics provide:

- Short-term follow-up care after hospital discharge for people with chronic conditions
- Case management services to frequent users of the emergency medical services (EMS) system
- Directly observed therapy for people with tuberculosis
- Collaboration with hospice nurses to reduce unwanted transports of hospice patients to an emergency department
- Transportation for people with mental health needs to mental health crisis centers
- Transportation for people who are acutely intoxicated to sobering centers
- Transportation for patients with low-acuity medical conditions to urgent care

centers

The Healthforce Center at UC San Francisco conducted an evaluation of the pilot project and found that community paramedics are collaborating successfully with physicians, nurses, behavioral health professionals and social workers to fill gaps in the health and social services safety net.

The evaluation yielded consistent findings for six of the seven community paramedicine concepts tested. All of the post-discharge, frequent 911 users, tuberculosis, hospice, and alternate destination - mental health projects have been in operation for at least two and one half years and have improved patients' well-being. In most cases, they have yielded savings for payers and other parts of the health care system. Findings regarding outcomes of a project testing the sixth concept, alternate destination - sobering center, suggest that this project is also benefitting patients and the health care system over the course of its first 14 months. The seventh concept, alternate destination - urgent care, shows potential but further research involving a larger volume of patients is needed to draw definitive conclusions.

Since the City of Long Beach has its own health department, its own paramedic service, several hospitals and numerous clinics, a Long Beach Community Paramedicine Program could potentially create a new model of community healthcare for Long Beach residents with a more effective and efficient method of service delivery for certain healthcare needs, especially to our most vulnerable communities, potentially at lower cost.

This matter was reviewed by Budget Manager Grace H. Yoon on March 8, 2019.

This recommendation requests a report in 120 days on the potential costs, benefits and challenges in forming a Long Beach Community Paramedicine Program. Compiling this report is anticipated to require a moderate level of staff hours beyond normal budgeted scope of duties and is expected to have a moderate impact on existing City Council priorities due to strain on staff capacity, the complexity of the issue, and balancing against other priorities. Any additional fiscal impact of the Community Paramedic Program would be included in the requested review.

Approve recommendation.

STACY MUNGO  
COUNCILWOMAN, FIFTH DISTRICT

SUZIE PRICE  
COUNCILWOMAN, THIRD DISTRICT

DARYL SUPERNAW  
COUNCILMEMBER, FOURTH DISTRICT

REX RICHARDSON  
COUNCILMEMBER, NINTH DISTRICT