

Executive Summary:

The concept of Mobile Integrated Healthcare and Community Paramedicine (MIH & CP) has been existing for quite some time, but more prevalent in other countries around the world than in the United States. The primary purpose of MIH & CP programs are to provide more healthcare services directly to patients on location and to minimize trips to the hospitals. Ever since the existence of the Fire departments, they have been attending the medical emergencies along with their role in emergency responses. Many EMS services rely on Fire departments in order to easily reach out to the communities. The main objective of this project is to show where mobile integrated healthcare and community paramedicine (MIH & CP) is being used in the USA, what information is available from those communities, and document a report so as to help NFPA technical committee of EMS-AAA develop a document relating to Fire based MIH & CP systems. Information about this value based healthcare practice with a focus on Fire department based programs are collected and reported based on a thorough literature review.

It is realized that plenty of services are offered by MIH & CP programs, including both pre-hospital and post hospital healthcare. MIH & CP programs can be relevant to both rural and urban areas, but these communities have different capabilities and needs. Hence developing, implementing and evaluating these programs for rural and urban areas should be done differently. As the fire departments closely work for and in every community, there is a tremendous opportunity for fire department based MIH & CP programs.

The case studies reviewed in this report indicates that a successful program should capitalize on linkages, collaboration and integration with other health care resources in the community. There is also an opportunity for innovation. With the ever improving technologies, there can be more out of hospital emergency services be provided. One example, which can be explored with technology is the provision of telemedicine consultation and real time dispatch of results from tests. Another integral part of these programs is its evaluation and review of outcomes. It is realized that successful models were launched as pilot programs and then expanded into larger ones. It is important to ensure that programs are ready for evaluation at the right time. Many evaluation or assessment criteria must be repeated at various intervals. Beyond all these, there should be a clear and formalized description and clarification needed on the expanded role of paramedics/EMTs. Additional training programs for the paramedics are crucial for this to be achieved.