



Pilots Reduce Readmissions and Overcrowding



The UCLA Center for Prehospital Care and collaborators from the Los Angeles County Emergency Medical Services (EMS) agency and the Glendale and Santa Monica fire departments have launched two pilot programmes that are designed to reduce hospital readmissions and address overcrowding in emergency rooms.

The Community Paramedic Pilot Programs will expand the roles of Glendale and Santa Monica paramedics and will allow them to interact with members of their communities.

The programmes were initiated in light of a report by the Institute of Medicine that recommended the use of alternative ways to deliver healthcare using emergency medical services agencies.

"EMS traditionally responds to 9-1-1 calls only. They find a patient with a problem and transport them to an emergency department. The thought was maybe there were other patient care delivery options these very well trained professionals could perform," said Dr. Baxter Larmon, an adjunct professor of emergency medicine, director of California State Community Paramedic CORE Education and co-principal investigator of the UCLA pilot projects.

In order to gauge what duties EMS can perform, it was decided that pilot projects should run to gather this information. UCLA's are the only projects being tested in Los Angeles County and were launched on 1 September. The Alternate Transport Program will transport patients with less serious medical complaints to one of several approved urgent care centres for treatment instead of to an emergency room. Since wait times are shorter at urgent care centres, ambulances and crews can resume their tasks more quickly. Dignity Health Glendale Memorial Hospital and Glendale Adventist Medical Center are both participating in this programme along with UCLA Medical Center Santa Monica.

A large number of 9-1-1 do not require emergency department resources but can be easily handled at urgent care centres. The goal of these pilot projects is to reduce the burden of emergency departments and reallocate patients with minor illnesses or injuries to medical centers where they can be treated quickly and efficiently. Wait times in emergency rooms can go up to six hours but finding alternate ways of delivering healthcare could result in better utilisation of emergency rooms and improve patient satisfaction and outcomes.

The second pilot program was also launched on 1 September and will be implemented in Glendale with Glendale Adventist Medical Center and the Glendale Fire Department. It will focus on patients with congestive heart failure (CHF) who have recently been released from the hospital. Patients will receive a home visit from well-trained paramedics and their symptoms will be assessed and evaluated and it will be ensured that the patients are taking their medications as prescribed. Approximately 64 percent of CHF patients are readmitted within seven days so it is important to determine the missing link in the chain of care that is resulting in these

readmissions.

"Going back to the hospital is a disruptive experience for the patient and may not improve their quality of life," Rottman said. "Anything that we can do to cut costs, save hospital beds and give patients a good quality of life would be a vast improvement."

Source: [University of California - Los Angeles Health Sciences](#)

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