



ANNUAL REPORT 2018

COMMUNITY & PUBLIC HEALTH

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A LETTER FROM OUR ADMINISTRATOR

2018 has been an exciting year in which Community and Public Health has expanded its impact upon our community. In February, the division welcomed a new administrator to lead and guide it during the next phase of its growth. In August, the division launched the CMED-2 pilot unit to gather data that will help inform future decisions around providing optimal emergency response for our community. During the month of September, CPH launched a 3rd CRT unit that is operating during the “swing shift” providing an even broader mental health crisis response to our community.

As you read this year’s report, you will notice a key change to our signature CARES program. A robust evaluation of our data combined with observation of member behavior revealed to us that our members and our community would benefit from a change in how we navigate our CARES members. Beginning in January of 2018, CARES members began receiving 6 months of intensive navigation followed by 6 months of observation. This allows our navigation teams the opportunity for an extended period of time to provide support and direction followed by an observation period where the member’s navigator can re-engage in their care if necessary. This lengthening of the total tracking period to one year means that we have only

recently seen our first cohort complete the entire navigation cycle, but every month going forward will see new cohorts graduate from the program. I know that when you see in this report the meaningful change that we are observing, you will be as excited about this change as we are!

This year we have had the opportunity to strengthen existing community partnerships as well as build new ones. Some of these relationships relate to new pilot programs we look forward to launching in 2019 while others relate to deepening of relationships to increase our joint impact on the needs of our community. In addition to these community relationships, we have also built new relationships throughout the state of Colorado and across the country as we have hosted numerous agencies seeking an in depth experience and understanding of our CARES and CRT programs with the goal of providing similar services in their own communities.

We are looking forward to embracing 2019 with the same spirit of innovation by launching at least two new pilot programs while continuing to assist our community and community members through our established CARES and CRT programs.

- Steven Johnson

ABOUT US

The CARES program was developed in 2012 by the Colorado Springs Fire Department (CSFD), with the support of the chiefs who recognized the evolving healthcare needs of the community. In partnership with the University of Colorado Health – Memorial Hospital and Centura Health System’s Penrose-St. Francis Hospital, the group that would become the Community & Public Health Division (CPH) began a pilot program to determine the causes of the 9-1-1 and emergency department overutilization.

One of the primary findings for the initial pilots was the prevalence of medical and behavioral health (BH) concerns amongst patients. This led to behavioral health specialists being added to the CARES team, and ended up spawning the creation of the Community Response Team (CRT) to directly respond to behavioral health crises as they were happening.

In addition to CRT, the CPH division also instituted CMED2; a data collection and emergency response crew aimed at responding to low-acuity 9-1-1 call in real-time, providing patients the right care at the right time in the right place.

The CPH Division has evolved from the original pilot into an innovative and valuable community-wide collaboration. We thank and look forward to the continued support from the CSFD, Community Partners and the community at-large.

CSFD CARES

CSFD CARES is a program which endeavors to assist frequent users of the 9-1-1 and emergency departments (6 visits to the ED or 6 9-1-1 calls within a 6-month period) in Colorado Springs with their physical, medical and behavioral health needs through outreach, assessment, connection to community resources and care navigation. This allows community resources providers to keep vulnerable populations healthy rather than being able to provide reactive emergency services.

CSFD CRT

The CRT program was developed to assist patients suffering from acute behavioral health crisis by employing cross-agency collaboration to integrate behavioral health services into the broader healthcare spectrum. Designed to respond to behavioral health crises call from 9-1-1 and the state crisis line, the CRT team decreases the time between a patient’s call for help and their receipt of definitive services. This eliminates prolonged and often detrimental emergency room stays where little to no behavioral health intervention or treatment is performed.

CSFD CMED

The CMED pilot was developed as a research program for the CSFD in understanding the complexities of tiered response. The pilot serves as a data gathering unit to assist the Colorado Springs Fire Department towards a better understanding of the tiered dispatch and tiered response EMS system.

CSFD CARES

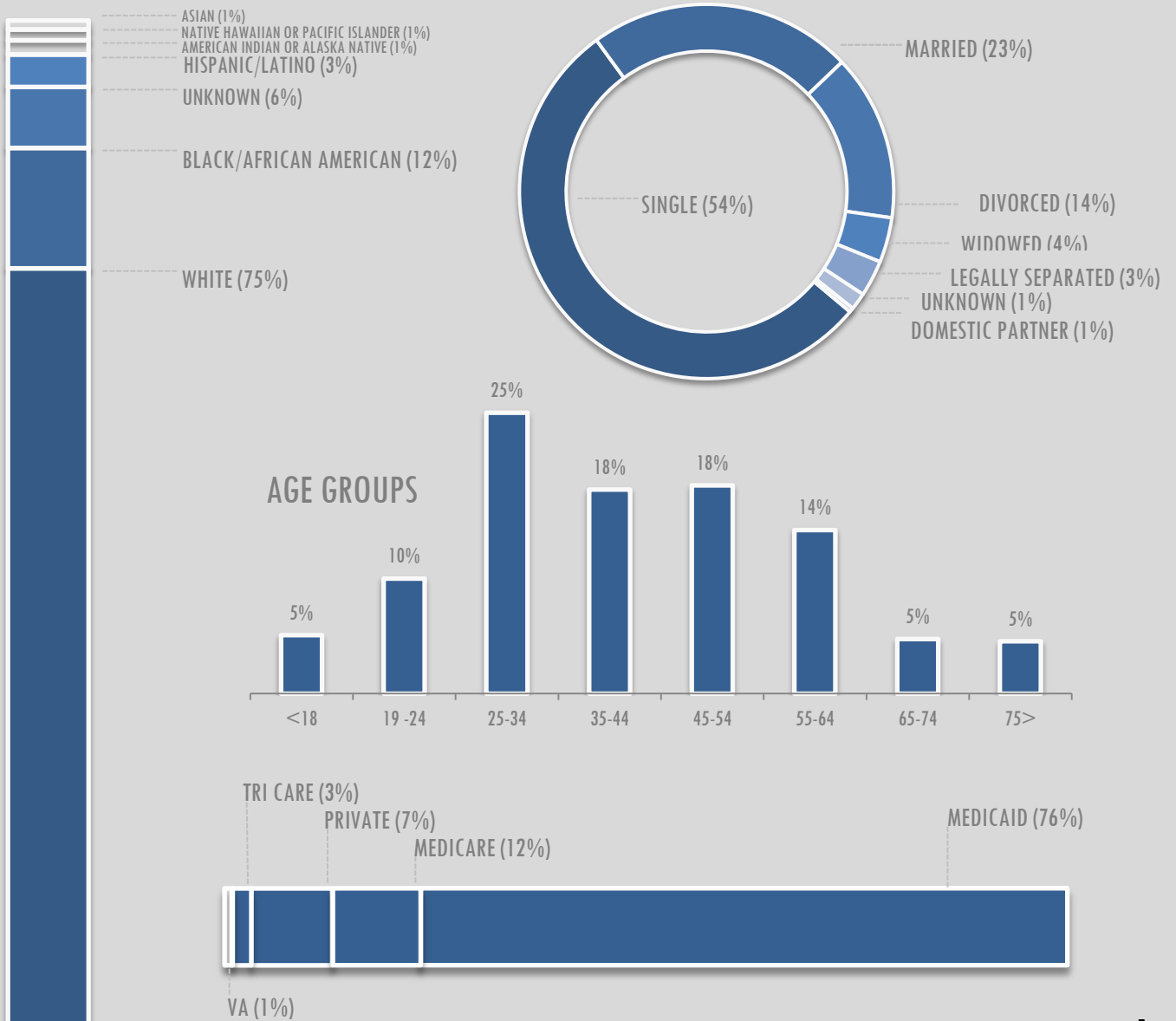
CARES IN 2018

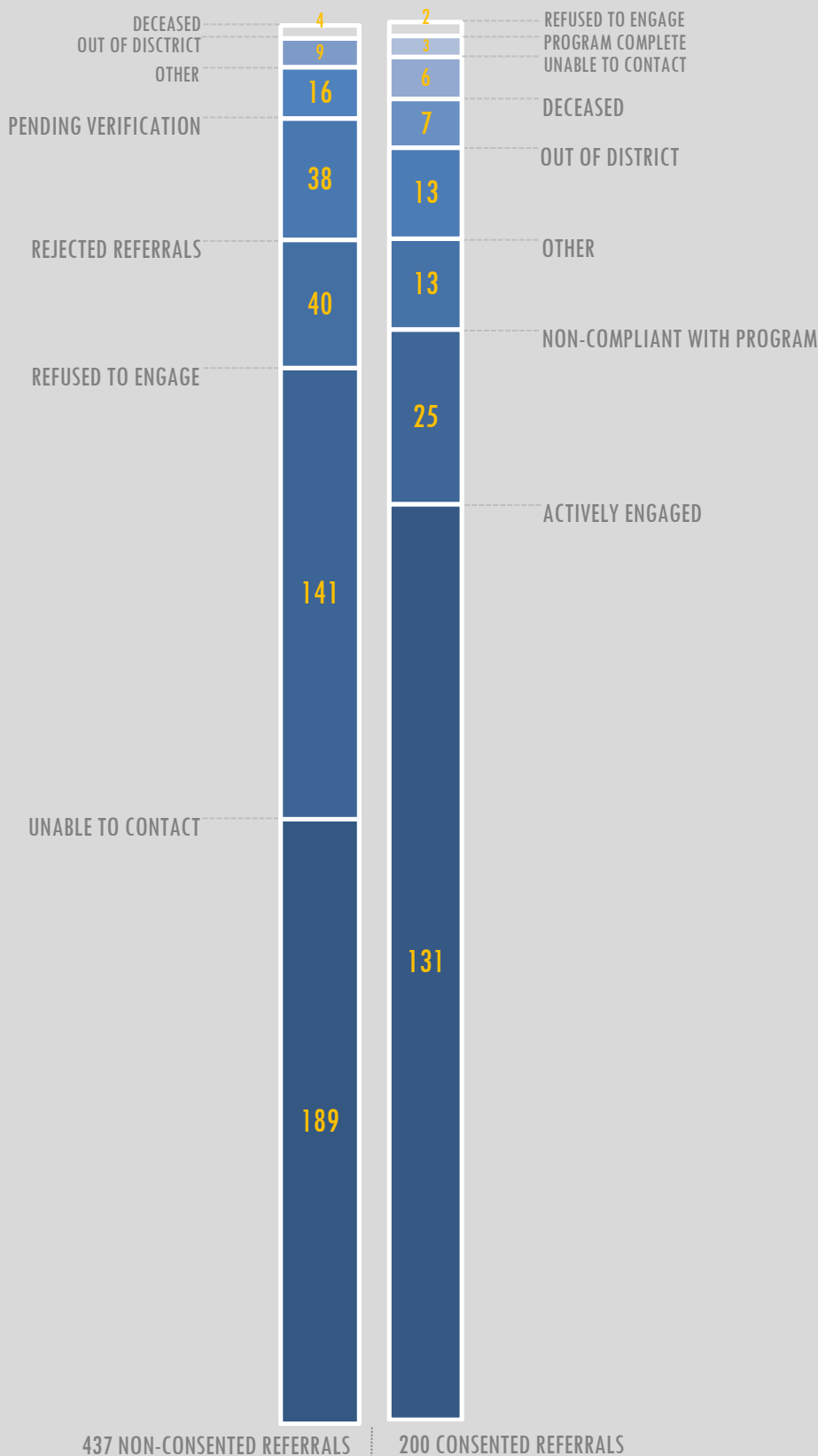
In January of 2018 it was decided that CARES would adjust its intervention time frame from a 90-day intensive intervention with a 30-day monitoring phase to one that proposed to meet the greater needs of the population we serve based on previous data collected. Therefore, CARES moved to a 6-month intensive intervention and added a 6-month monitoring phase for those that met the 40% reduction in usage key performance indicators (KPI). This decision was made in order to more accurately reflect behavior change and to observe what may cause a member to re-establish over usage patterns. For that cohort (67 in total) at the end of 2018, five had been moved back into intensive navigation due to usage increase that may have led to a re-referral or we learned that a major issue had arisen that we could assist with through navigation interventions.

The CARES team continued to strengthen its relationships within the community to include business agreements with both Strategic Behavioral Health hospitals in Colorado and a pilot program with AspenPointe's Crisis Walk-in Centers and the Centura Neighborhood Nurses to assist with their super utilizers.

CARES noted a reduction in referrals from 2017 to 2018. This decline was in part due to Medicaid transitioning from the RCCO system to the RAE and renegotiating contracts with both hospital systems. CARES is working closely with both hospital systems and the CSFD to increase referrals and the opportunity to intervene with those individuals who are taxing the system through overutilization.

DEMOGRAPHICS





STATISTICS

637 REFERRALS

356 VERIFIED

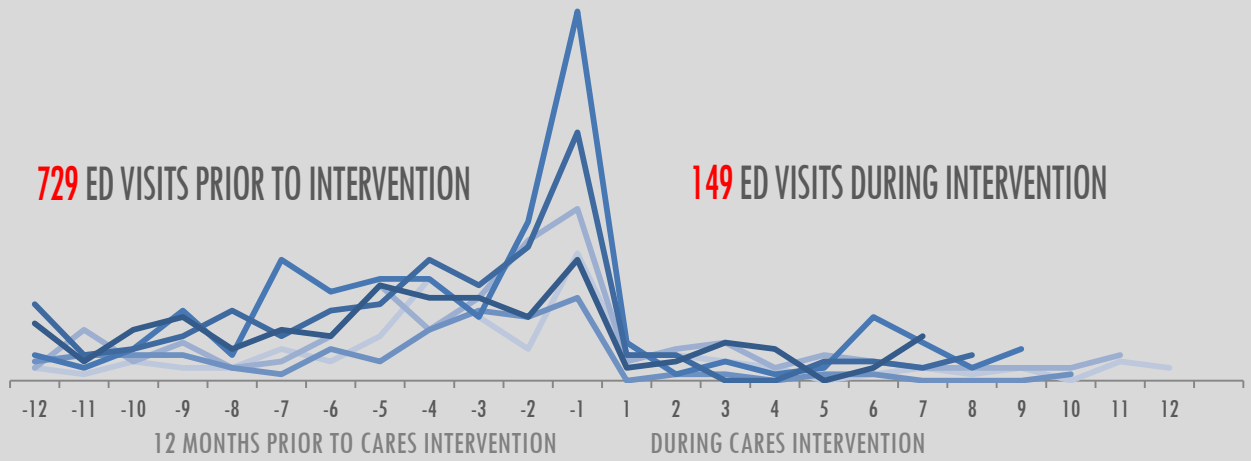
200 CONSENTED

131 ACTIVELY ENGAGED

In 2018 there were a total of 637 referrals and only 356 referrals were verified.* From the verified referrals, the CARES team managed to receive consent from 200 members.

Currently there are 131 Actively Engaged members, while 69 were closed for various reasons (see adjacent graph)

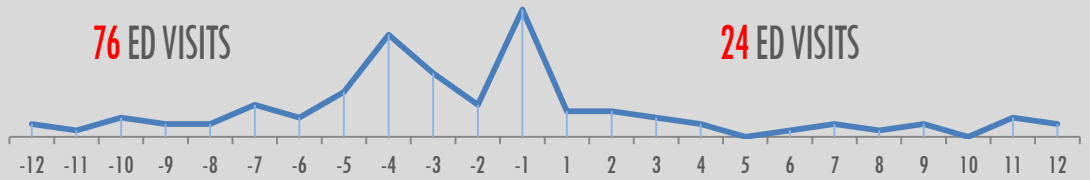
* A referral is considered verified if the patient is alive at time of initial contact, if initial contact by CARES was successful, and if the patient resides within district at the time of referral.



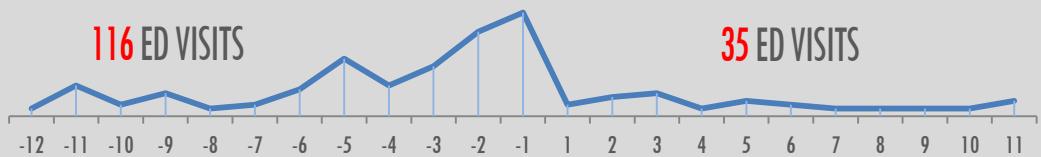
51 MEMBERS IN OBSERVATION

7 MEMBERS COMPLETED PROGRAM

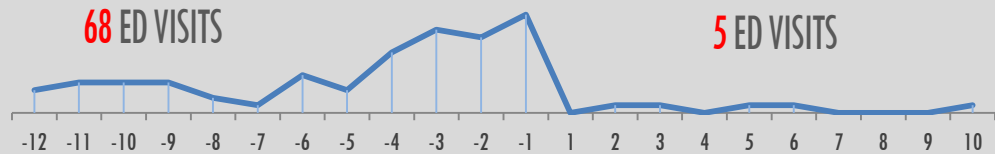
JANUARY COHORT



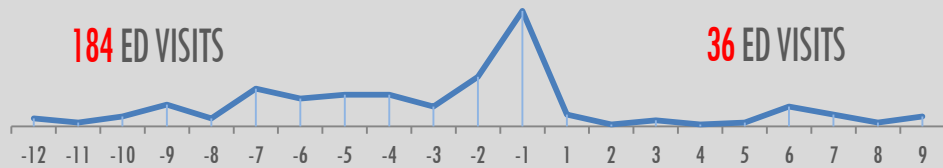
FEBRUARY COHORT



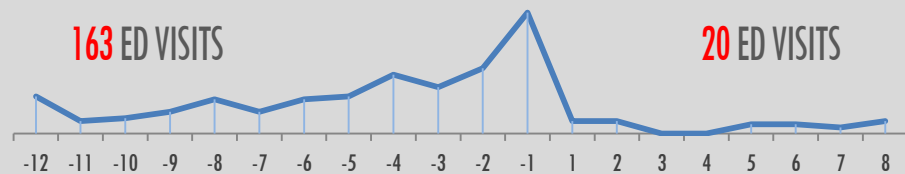
MARCH COHORT



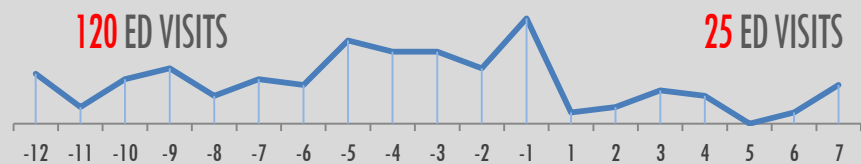
APRIL COHORT



MAY COHORT



JUNE COHORT



CARES IN ACTION

Too often, the members of our CARES program are seen as pariahs and a burden on our community. There is little empathy towards their situation: perhaps this is an example of society judging a book by its cover. In contrast, we believe that the majority of our members seek to be independent and endeavor to live an ordinary and healthy life, or at the very least, a life with respect and dignity. It is within this milieu that CARES strives to provide a world-class navigation model where education, advocacy, support and prevention are at the center of our care resulting in countless successes for our members. We would like to share with you two stories that epitomize the care that is provided by our navigators every day and the victories that result from their care.

The first story is about a member who was struggling with chronic heart failure, chronic kidney disease, bell's palsy, pancreatitis and chronic back pain when we met him. This was further complicated by the fact that he had no income, was homeless and had a 20 year history of substance abuse. The CARES program stepped in and supported this member with medical and addiction navigators as well as providing a peer mentor for his substance abuse. One of his objectives was to lead an independent and sober life. During the following months our team helped to manage his chronic ailments and sought residency in a sober living complex. As the months progressed, his determination and recovery impressed the management of the sober living complex and they offered him employment as the House Manager.

Currently, this member is looking to open his own sober living house with the backing of private funders, as well as continuing to assist the CARES program as a peer mentor. We are truly amazed at his recovery and are thankful that he has become a meaningful community partner!

Around the same time we received a referral for member whose condition included chronic obstructive pulmonary disease (COPD), congestive heart failure (CHF), obesity, severe depression, suicidal ideation, and multiple falls due to limb amputation. As we learned more about our member, it became clear that his ailments were terminal and his level of care was outside our scope. Nevertheless, our navigators aspired to provide him with a life of dignity and respect, even if the time that he had left would be brief. As his illness progressed, hospice was imminent. While our member understood the need to be placed in a facility, he bemoaned leaving behind his precious canine companion. But soon thereafter, one of our employees offered to not only adopt the 16-year old "pup", but to also bring him for regular visits to our member. CARES then worked tirelessly with the member's Power of Attorney (POA) to find the right facility and within a few weeks, he made the move. During the transition, the CARES team cleaned his home, assisted with moving his belongings and helped disperse other personal items as requested. As his illness progressed, the CARES team reached out to the CSFD chaplains who agreed to visit, providing the opportunity for soul care. In addition, multiple members within our navigation team visited him regularly; sometimes bringing his favorite foods, other times just to provide companionship. Ultimately, he succumbed to his illness.

This unique, talented, funny and fantastic artist was cherished by the team and his passing was hard for them, but each was grateful to be part of the journey that allowed him to pass on from this life deeply cared for and respected.

Our treatment for each member is unique and so is each success. Our victories come as a result of our team providing the best navigation possible in each unique circumstance. While the outcomes of our two members were vastly different, our dedication and advocacy were resolute: to provide support with respect and dignity.

CSFD CRT

CRT IN 2018

The Community Response Team (CRT) aims to change the way emergency personnel respond to behavioral health crises in our community. Our goal is to reduce the time between a 9-1-1 call for an acute behavioral crisis and patient receipt of definitive behavioral health services. Equally important, CRT also seeks to establish a more efficient utilization of the Fire Department, Emergency Medical Services (EMS), and the Police Department.

2018 was a rewarding year for the Community and Public Health Division's CRT program. A grant from the Colorado Springs Health Foundation through the Police Department made it possible for the Community and Public Health Division to add an after-hours CRT shift. On September 10, 2018, CRT3 began providing its services to the greater Colorado Springs Community.

In 2018, the CRT program responded to 3,147 incidents and treated 1611 patients. Our team released at least 643 Fire Department crews, and 2711 Police Department crews. These crews returned to service and were ready to respond to high-acuity emergency calls. As in past years, most patients have been appropriately triaged and redirected towards the right resource and/or facility, relieving the Emergency Department (ED) from misuse and overcrowding as well as releasing important emergency services back into the community.

In the coming year, the CRT program aims to continue its innovative approach towards partnering with experienced area behavioral health providers to gain an understanding of effective and appropriate alternatives to emergent care for patients with behavioral health conditions.



3147
INCIDENTS

1611
PATIENTS
TREATED

643 FD
UNITS
RELEASED

2711
PD UNITS
RELEASED

CRT1

1337 TOTAL INCIDENTS
734 PATIENTS TREATED
385 MALES
349 FEMALES
68 M1 HOLDS
4 EC HOLDS

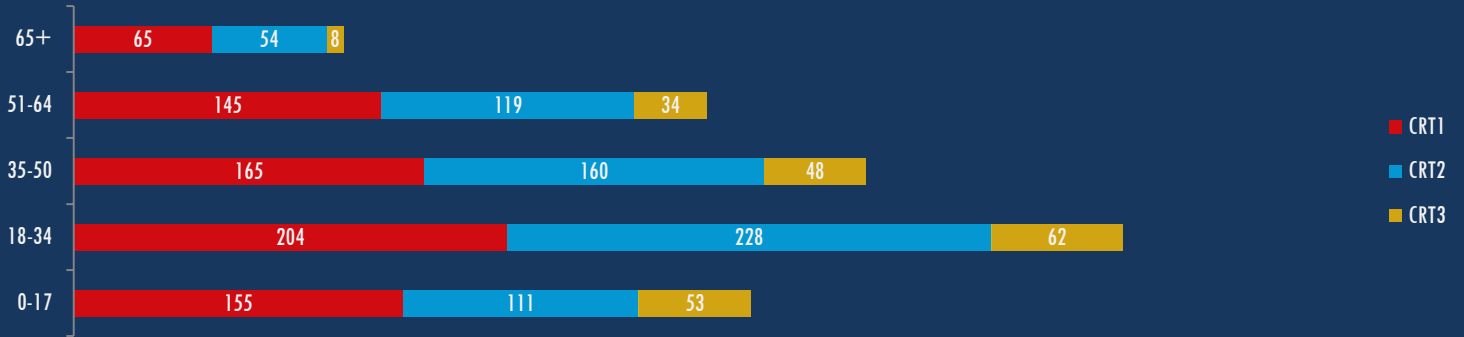
CRT2

1424 TOTAL INCIDENTS
672 PATIENTS TREATED
335 MALES
337 FEMALES
60 M1 HOLDS
6 EC HOLDS

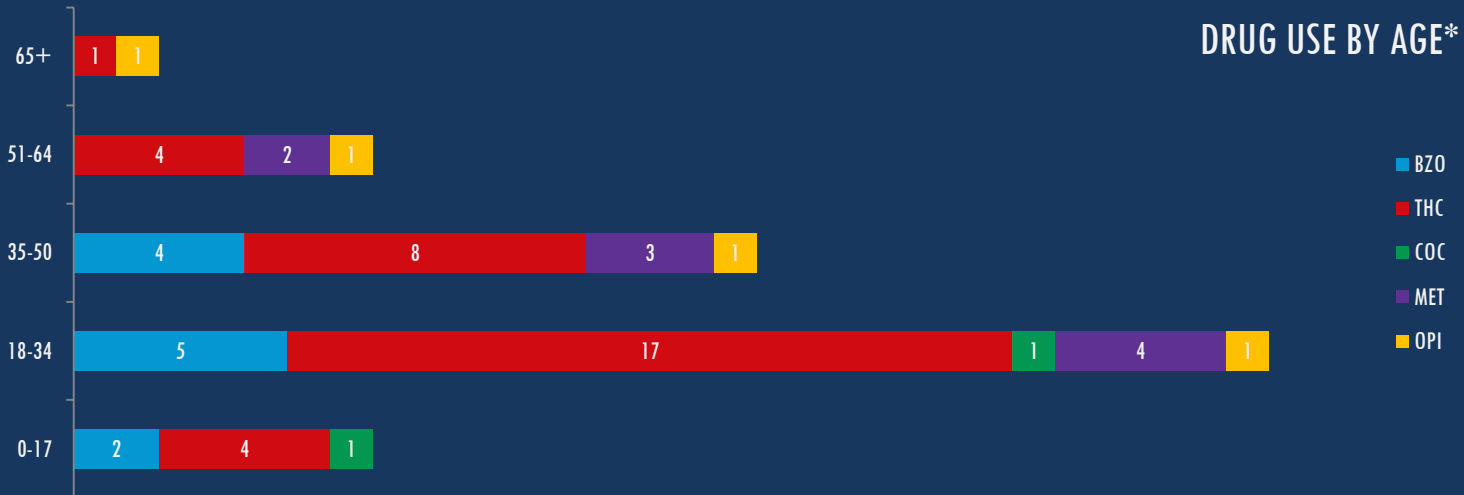
CRT3*

386 TOTAL INCIDENTS
205 PATIENTS TREATED
104 MALES
101 FEMALES
31 M1 HOLDS
7 EC HOLDS

PATIENT AGES YTD



DRUG USE BY AGE*

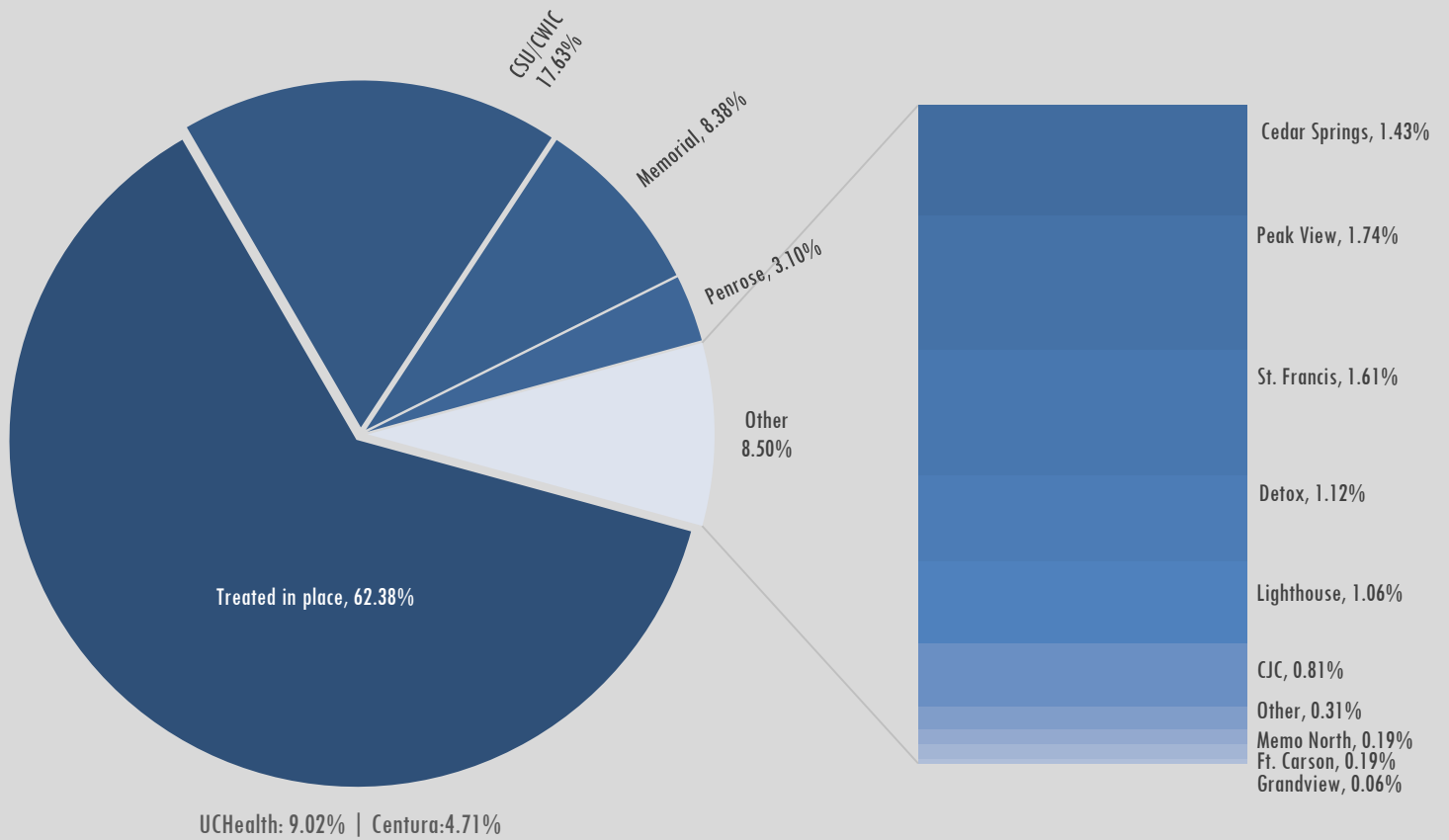


*Statistics only for individuals tested and not for patients treated

INSURANCES

Medicaid	744	Other	6
N/A or Unknown	408	AARP	3
Medicare	187	Best Health	2
Tricare	87	Bright	2
VA	74	PACE	2
Blue Cross/Blue Shield	38	FRIDAY HEALTH	2
United Health Care	25	United Behavioral Care	1
Cigna	25	UMR	1
Kaiser	20	MCD	1
Aetna	15	Colorado Choice	1
Humana	13	UPMC	1

DISPOSITIONS YEAR-TO-DATE



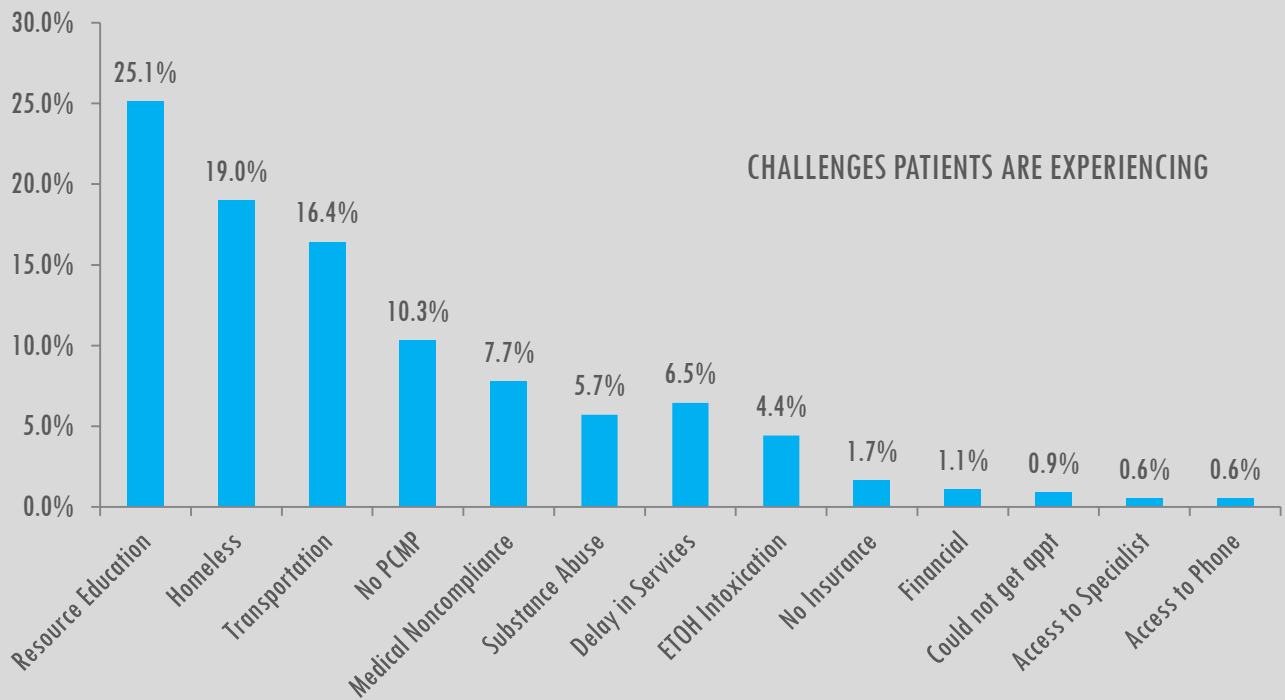
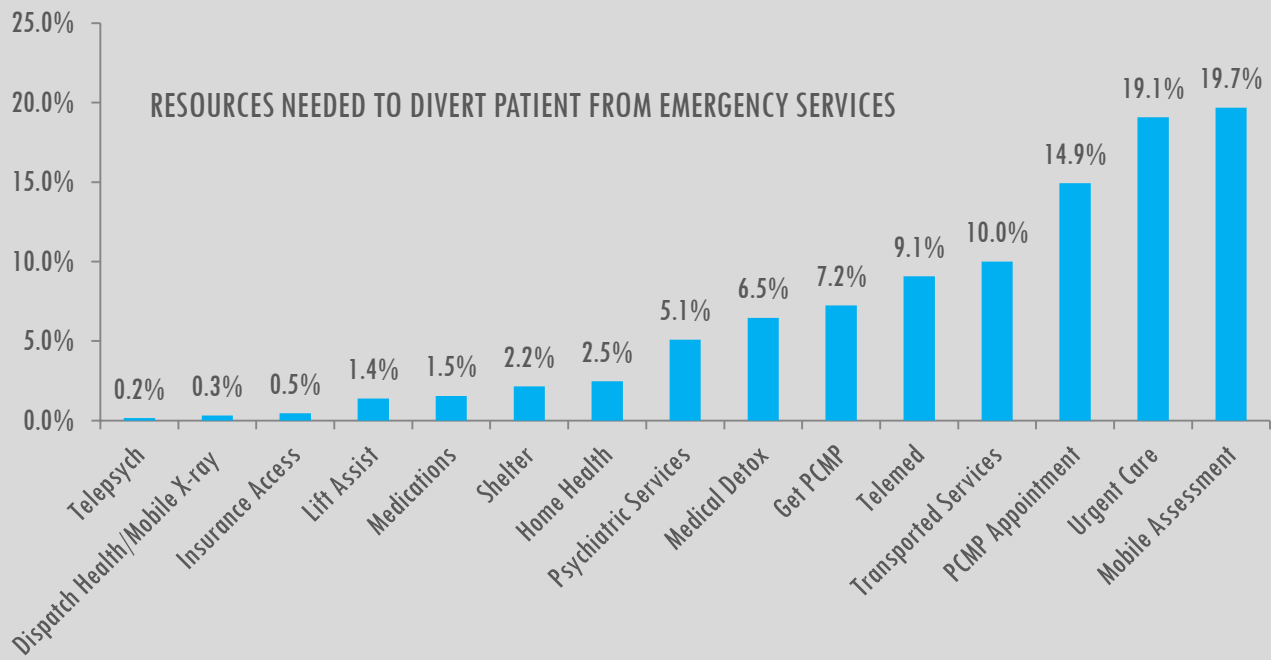
CSFD CMED

C MED

The C-MED2 pilot shift began operating in August 2018 funded by a grant from the Colorado Springs Health Foundation and under the direction of the Colorado Springs Fire Department's (CSFD) Community and Public Health Division (CPH). The pilot serves as a data gathering unit to assist the Colorado Springs Fire Department towards a better understanding of tiered dispatch and tiered response EMS system. The pilot has been highly effective and will continue to assist the Colorado Springs community into 2019.

CMED IN NUMBERS

TOTAL INCIDENTS:	658
# OF UNITS RELEASED:	373
# OF PATIENT CONTACTS:	276
AVERAGE TRAVEL TIME:	0:05:12
AVERAGE ON SCENE TIME:	0:21:42
# OF TRANSPORTS:	186
AVG # OF CALLS PER DAY:	8



OUTREACH

OUTREACH

Being able to help others in a community is a privilege as it allows municipal non-profit organizations such the Colorado Springs Fire Department to step out beyond emergency response to assist and mitigate barriers to those who most in need. Our focus is to serve the citizens of Colorado Springs in collaboration with other state, county and local agencies with focused, cost-effective events.

Super-utilizers of the 9-1-1 system, emergency rooms, homeless population and the growing aging population will always be a major target for our outreach efforts. Despite connectivity issues for these special populations, we have been able to customize our efforts to overcome these issues. Thus, the process of identifying healthcare essentials, developing, and delivering services for the underserved and the at-risk population is improved by community engagement.

Outreach efforts were kicked off through our association with the City of Colorado Springs Park and Rec at Meadow Park Community Center. Team members organized multiple physical fitness challenges at a back to school event. The challenge started with exercises to warm up their muscles for the events and we

could see the excitement in the children's eyes as the warm-up concluded and various events started up. Over 122 kids participated. Additionally, we participated in the 25th National Senior Health and Fitness Day at Westside Community Center in May. Team members provided information on nutrition and common diseases such as diabetes and hypertension. The event was very successful and we have already been asked to participate again in 2019. We rounded out the year with numerous vaccination events for our homeless population at multiple events and locations in an effort to maximize contact.

Although, there has been a decrease in the number of community liaisons, this obstacle was overcome by the ingenuity of our CPH teams and volunteers. Partnerships were established with the El Paso County Health Department, YMCA, Springs Rescue Mission, RJ Montgomery, Peak Vista and various city community centers in Southeast Colorado Springs.

The vision for 2019 is to increase outreach to our most vulnerable populations by incorporating with the BASIC and APP initiatives being launched in the New Year.



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