

# COMMUNITY PARAMEDICINE TO HELP PEOPLE WHO USE SUBSTANCES

## Q&A WITH EXPERTS

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### WILLIAM KEHLER

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Program Director, McDowell County Community Care Paramedic Program  
McDowell County, NC

### WHY COMMUNITY PARAMEDICINE?

When it was established, the McDowell County Community Care Paramedic Program was among the first of its kind in the country. The program's objectives are to (1) decrease high utilization of EMS for non-emergent issues, (2) prevent hospital readmissions by providing follow-up care to patients at high risk of readmission, and (3) improve overall health and wellness in the community by partnering with health care providers to conduct wellness screenings and events. We provide resource navigation to patients; many were not aware of what resources were available to them. Community paramedicine helps connect patients to those resources.

### HOW DOES THE PROGRAM ADDRESS SUBSTANCE MISUSE?

Community paramedics are a part of a post-overdose response team. The team follows up with patients within 24-48 hours after an overdose, dispenses naloxone, and links the patient to community support programs, including medication-assisted treatment when appropriate.

### HOW DOES THE PROGRAM ADDRESS PATIENT RELUCTANCE?

Our peer support specialist is often the first point of contact. The specialist builds trust with the patient by taking care of the patient's urgent needs, such as providing food pantry support. Once the peer support specialist builds rapport with a patient, the specialist can meet the patient in person and guide the patient to specific programs. My advice to other community paramedicine programs is to embed a peer support specialist or recovery coach within the program.

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### WHAT CHALLENGES HAVE YOU ENCOUNTERED?

Especially in rural counties, there may be a lack of resources available to patients. For example, lack of transportation has been a big obstacle. Programs can partner with transit and non-profit organizations to assist with getting patients to treatment in adjoining counties.

### WHAT OTHER ADVICE DO YOU HAVE FOR SIMILAR PARAMEDICINE PROGRAMS?

We've learned that you have to take a holistic approach and form partnerships and working relationships with other agencies to address the needs of each patient.

You have to understand specific needs in community, identify partners who can assist or be of benefit, and integrate different agencies to identify a strategy through which you address the issues in your community.

## CAPTAIN SAMUEL ROBINSON

Program Coordinator  
McDowell County Community Care Paramedic Program  
McDowell County, NC

### HOW DID THE COMMUNITY PARAMEDICINE PROGRAM IN YOUR COMMUNITY COME ABOUT?

A needs assessment revealed that a lot of people were medically underserved in the community and using the ER for primary care services. Other health disparities involving conditions like diabetes, heart disease, and uncontrolled high blood pressure were leading to further problems. The goal was to link people to services prior to a crisis developing in the community.

Initially, the program was funded through a foundation grant. The program started with one full-time community paramedic who began gathering resources within the community for referrals. We created good relationships with other agencies and non-profits. We now have three community paramedics and provide services seven days per week.

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### HAS THE PROGRAM SEEN POSITIVE RESULTS?

We’ve seen a decline in total EMS call volume four years in a row and also a significant total cost avoidance over that time period. There are healthier people in the community, as more people have been linked to primary care and been provided transportation to appointments. Some people who have received our services have told us that before they received a community paramedic intervention, they felt isolated and didn’t know where to go. But with community paramedic intervention, they felt more educated about resources. Our philosophy is not just to provide services once, but to educate patients and make them more self-reliant.

### HOW DOES THE PROGRAM ADDRESS PATIENT RELUCTANCE?

Our approach is to not expect anyone to do anything in particular. For those who have survived an overdose, we find out what their goals are, try to prevent harm, and let them know someone is there whenever they’re ready to seek treatment. We’re here and want to help you reach your goals, not demand treatment.

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### BASED ON THE LESSONS YOU HAVE LEARNED, WHAT WOULD BE YOUR ADVICE TO OTHER PROGRAMS?

Make sure your program is flexible and fluid. Your goals and approach will change from the initial ones. Adapt with the needs of the community. Persistence is key; don’t give up on a resource, and don’t forget to think outside the box. For example, an individual experiencing isolation wanted a pet, and getting her one decreased her EMS call volume and improved her quality of life.

## DAVID EZZELL

Education Consultant  
North Carolina State Office of EMS

### WHAT IS YOUR ROLE WITH THE NORTH CAROLINA STATE OFFICE OF EMS?

I help oversee community paramedicine programs across the state. This can involve assisting with new program development, helping existing programs, developing protocols and procedures, and making presentations for county commissioners, taxpayers, and hospitals.

### WHAT SHOULD AGENCIES CONSIDER WHEN STARTING A NEW COMMUNITY PARAMEDICINE PROGRAM?

It needs to start with some questions. Is there a need in your community? Where are the gaps? How can we get people to work together to make it happen?

It is essential to do the legwork because it can take months to get everyone to the table. Address resource coordination, which can be a problem. Consider how you can partner with other organizations, such as harm reduction coalitions, public health officials, sheriff offices, local jails, and pain clinics. The focus is to get people who have unmet needs to the right place at the right time.

Have open, frank conversations with everyone. Put your cards on the table. Prevention, treatment, and recovery communities are used to working in silos, which isn't conducive to this type of work.

### WHAT ARE SOME OF THE PRACTICAL CONSIDERATIONS FOR SOMEONE WHO IS STARTING A NEW COMMUNITY PARAMEDICINE PROGRAM?

EMS has the ability to be mobile and find people and to follow up at different times and places. However, directly after an overdose, the patient isn't always the most receptive to entering treatment. Follow ups can be done within 12 to 24 hours. It is important to plant the seed with the individual right after an overdose and ask where you can find them within 12 to 24 hours. If the person is not interested in treatment, ask if you can give them a naloxone kit. After a week, follow up with the individual and ask if he or she needs anything. You need to form some type of trust or bond with people who are in need of help but don't really realize it; for example, assist them with getting food or getting their power turned back on. It is also important to involve a peer-support specialist—get someone who has been in their shoes before. This can help make the program more successful in terms of outreach.

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