



COMMUNITY ACTION COLLABORATIVE (CAC)

AKA: SQUAD I

SQUAD I

Who is Squad 1?

- Multi-disciplinary team consisting of:
 - Paramedic for the Community (Darren)
 - Licensed Behavioral Health Clinician (Jayme)
 - Community Health Care Manager (Lacey, Nick, & John)
 - Coordinator (Meredith)



GOALS OF CAC

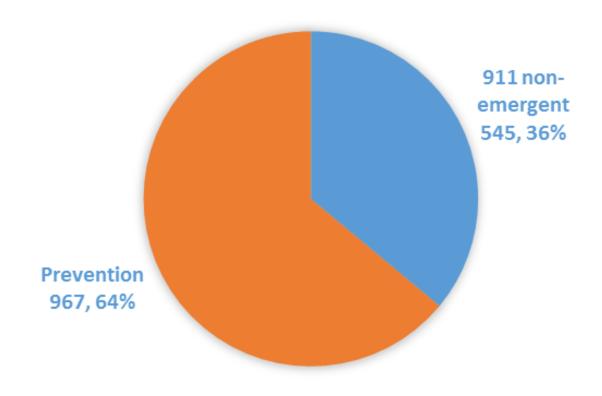
Prevention

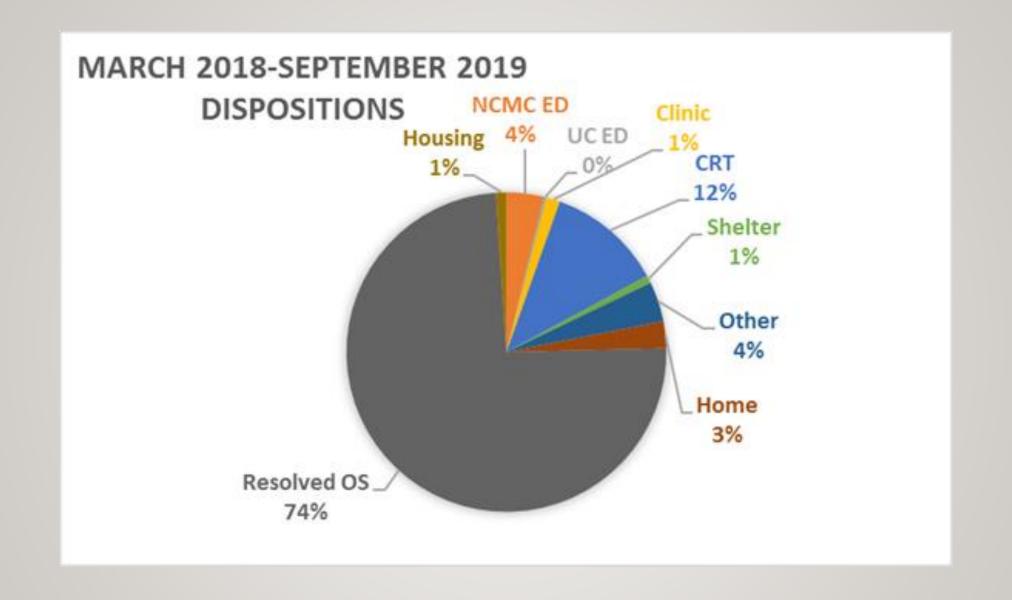
- Outreach to constituents whom have been identified as needing intervention
 - Screening for needs:
 - Behavioral
 - Medical
 - Social
- Education
 - Proper use of 9-1-1 services
 - When to go to the Emergency Room
 - Alternatives to using the ER
- Connection to Resources

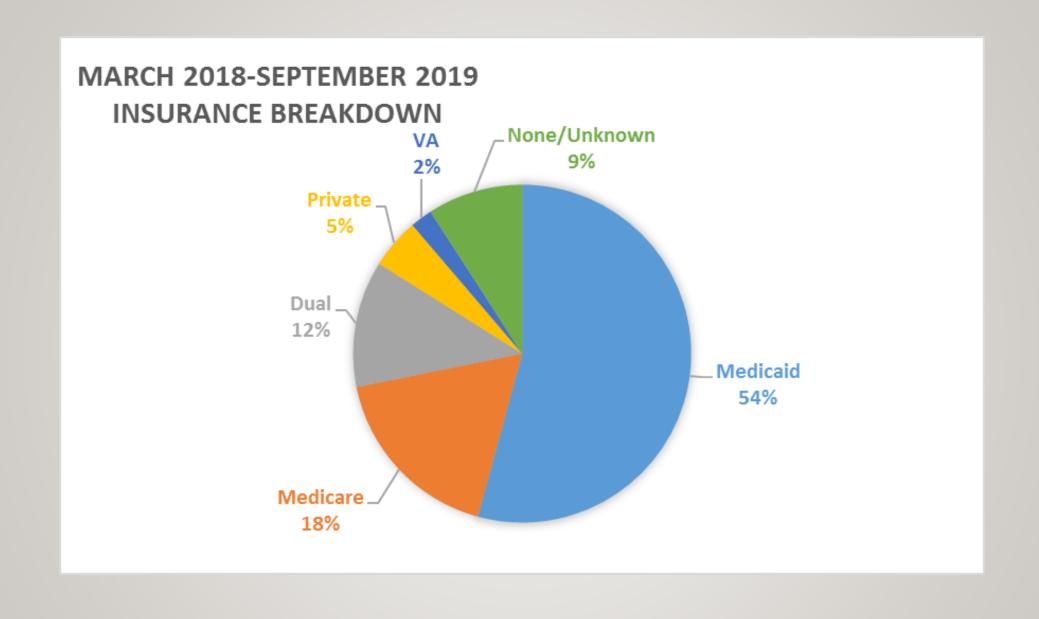
Diversion

- Crisis Stabilization
 - Behavioral, Medical, Social
- Intercept 9-1-1 calls from CAD
 - Arrive on scene based on call details
 - Requested by GPD/GFD
- Alternative Destinations outside of Emergency Services
 - ER
 - Jail
- Connection to Resources









FINANCIAL IMPACT

AN AVOIDABLE 911 CALL THAT INCLUDES AMBULANCE TRANSPORT AND EMERGENCY ROOM VISIT FOR A CONDITION THAT IS TREATABLE IN THE PRIMARY CARE OR BEHAVIORAL HEALTH SETTING, INCLUDING BRONCHITIS, COUGH, DIZZINESS, FLU, HEADACHE, BACK PAIN, NAUSEA, SORE THROAT, STREP THROAT, UPPER RESPIRATORY INFECTION, AND BEHAVIORAL HEALTH CONDITION

	Self Pay / Private Insurance	Medicare	Medicaid
Ambulance Transport to ER	\$1,900	\$300	\$150
Emergency Room Visit	\$2,032 \$1,200		\$750
Total	\$3,932	\$1,500	\$900
Clinic / Crisis Center / Alternative Destination	\$190	\$100	\$70
System / Individual Savings	\$3,742	\$1,400	\$830

CLIENT #1 -

HOMELESS WITH A HISTORY OF INTOXICATION & HIGH BLOOD PRESSURE FREQUENT USE OF 911, DETOX & ER

- 4 month history:
 - 10 visits to the Emergency Room
 - 5 calls to 911
 - 5 Ambulance Transports for non-emergency situations

CLIENT #1

	Quantity	Self Pay / Private Insurance	Medicare	Medicaid
Ambulance Transport to ER	5	\$9,500	\$1,500	\$750
Emergency Room Visit	10	\$20,320	\$12,000	\$7,500
Tota		\$29,820	\$13,500	\$8,250
Clinic / Crisis Center / Alternative Destination	10	\$1,900	\$1,000	\$700
System / Individual Savings		\$27,920	\$12,500	\$7,550

CLIENT #2 -

HOMELESS WITH A HISTORY OF INTOXICATION & HIGH BLOOD PRESSURE FREQUENT USE OF 911, DETOX & ER

- 6 month history:
 - 33 visits to the Emergency Room
 - 29 calls to 911
 - 29 Ambulance Transports for non-emergency situations

CLIENT # 2

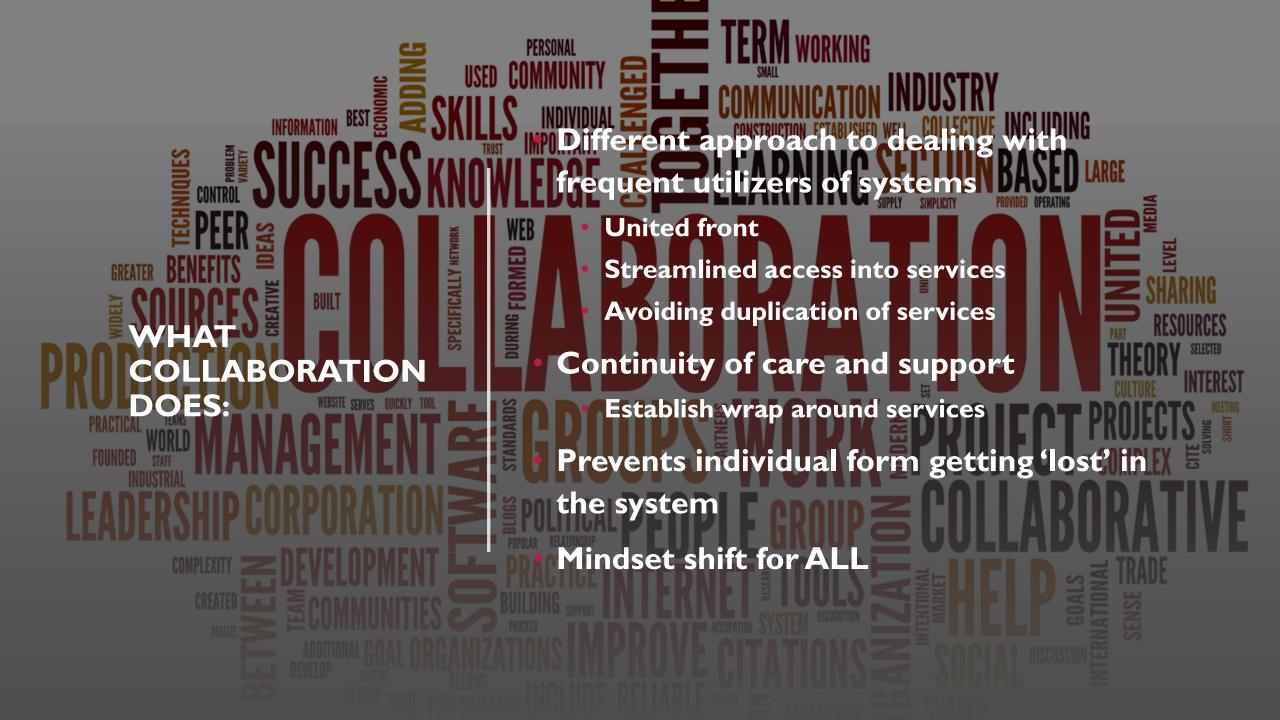
	Quantity	Self Pay / Private Insurance	Medicare	Medicaid
Ambulance Transport to ER	27	\$51,300	\$8,100	\$4,050
Emergency Room Visit	33	\$67,056	\$39,600	\$24,750
Total		\$118,356	\$47,700	\$28,800
Clinic / Crisis Center / Alternative Destination	33	\$6,270	\$3,300	\$2,310
System / Individual Savings		\$112,086	\$44,400	\$26,490

IMPACT ON 911 RESOURCES

- 34 responses by 911 resources (Police, Fire, Ambulance)
- 26 hours of out of service time for 911 resources (per agency)
- Alternative Response with Collaborative Partners will reduce non-emergency 911 calls leaving critical resources available for true emergencies

DATA...





WHY IS CAC BENEFICIAL TO ME?

- Refer someone you are concerned about.
- Resource so that you do not have to take on a role that is not yours.
- Tangible team to address medical, behavioral, and social needs in one interaction.
 - NRBH
 - Sunrise 'golden ticket'
 - Resourcing
- · Quick interventions and/or connection to needed services.
- Monthly inter-agency case reviews.
- Ultimately saving our community money through cost avoidance!

• Criteria:

- Anyone you are worried about!
- Frequently utilizing the inappropriate system for services/support.
- How to refer:
 - Via telephone:
 - Darren 970.381.1097
 - Meredith 970.373.8499
 - Via email:
 - <u>Darren.Conradson@Greeleygov.com</u>
 - mmunoz.alliance@nocoha.org

THANK YOU!

"The goal of this project has been to develop better communications between all community stakeholders to deal with chronic users of emergency services. The project has had some successes with individual citizens, but more importantly it is changing the mindset and emphasizing the need to work together to resolve these issues."

Deputy Chief Mike Zeller, GPD