

Community Paramedicine Division Fire Commission Report

August 2024

Programs Overview and Timeline

Program	Service Population	Launch Date	Full Implementation
EMS-6	Frequent 911 users	January 31, 2016	
Street Crisis Response Team	Community members in behavioral crisis & requiring well-being checks	November 30, 2020	7 th team added May 28, 2022 (EMD on June 22, 2022) SWRT reconfigured March 4, 2023
Street Overdose Response Team	Overdose response	August 2, 2021	2 nd team added June 27, 2022

Community Paramedicine Division Highlights

Qualitative Study describes the positive impact of the SCRT

“They made me feel like I mattered”: A Qualitative Study of How Mobile Crisis Teams Can Support People Experiencing Homelessness: On August 12th an article co-authored by former DPH staff member Dr. Matthew Goldman was published in the BMC (BioMed Central) Public Health Journal.

“[SCRT] was the most important, most wonderful thing that I’ve seen. Way different than an ambulance. Way different than the police. Police just stands there and tells you what’s wrong. And they go through your background, and they sit there and chat. But they just look at you, they don’t talk to you like

the [crisis] team was aware. They was telling me how you doing? If you want some water. What are you hearing? What are your symptoms? And they were there.” -pg. 7

McDaniel et al. BMC Public Health (2024) 24:2183
<https://doi.org/10.1186/s12889-024-19596-2>

BMC Public Health

RESEARCH

Open Access

“They made me feel like I mattered”: a qualitative study of how mobile crisis teams can support people experiencing homelessness

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The research underlying the article was developed through a series of qualitative interviews with individuals SCRT had served in 2021 and 2022. The article reported the positive impacts of SCRT, describing it as a “desirable alternative to law enforcement.”

Centers for Disease Control (CDC) Staff Site Visit: On August 12th, CDC officials visited San Francisco to receive updates on the City’s implementation of a multi-year, multi-agency grant “Overdose Data to Action.” The Fire Department previously committed to work with our

Department of Public Health on this grant whose goals include increased linkages and retention to care, harm and stigma reduction, implementation of best practices and overdose surveillance infrastructure. Section Chief of Administration Michael Mason met with the CDC members and shared an overview on the Fire Department's efforts as part of the City's integrated approach.



Community Paramedicine Division Speaker Series: On August 28th Dr. Barry Friedman, Faculty Director of New York University Law School's Policing Project, joined us for the August CP Speaker Series. As part of the Policing Project's Reimagining Public Safety initiative, four major cities collaborated with NYU to study their alternative response programs. An excerpt from their report on San Francisco:

"San Francisco's investments are displaying positive results. Our data show SCRT responding to roughly 29 calls a day in an average of 16 minutes. In the vast majority of these calls, the police are never called upon for backup. This saves police resources and indicates care can be provided without police. Similarly, SORT's performance offers reason for cautious optimism, as a significant proportion of clients accept harm reduction supplies or participate in successful follow-up visits." -Page 3, San Francisco's Public Safety System: Lessons in First Response Policy Implementation. (Full report available at <https://www.safetyreimagined.org/>)

Dr. Friedman shared his team's evaluation of San Francisco's alternative response framework and joined Department members for a facilitated discussion and Q&A session.

Wednesday,
August 28th

2:00 – 3:00 pm (virtual)

San Francisco Fire Department

Community Paramedicine Division

2024 Monthly Speaker Series



San Francisco's Public Safety System: Lessons in First Response Policy Implementation

New York University Policing Project

Dr. Barry Friedman serves as the Faculty Director of the Policing Project at New York University School of Law. As part of the Policing Project's Reimagining Public Safety initiative, four major cities collaborated with NYU to study their alternative response programs.

Dr. Friedman will share his team's evaluation of San Francisco's alternative response framework and join us for a facilitated discussion and Q&A session.

San Francisco's
Public Safety System:
Lessons in First Response
Policy Implementation
July 2024

Justica Gilbooy & Barry Friedman
Suffolk University, Policing Project, NYU School of Law

All San Francisco Fire Department Members Welcome
No Registration Required: tinyurl.com/AugustSpeaker

Department Medical Directors Recognized in UCSF Department of Emergency Medicine Annual Report: Dr. Lacocque and Dr. Graterol were both recognized in UCSF's Department of Emergency Medicine 2023 Annual Report. The report emphasized their work supporting Fire Department programs such as pre-hospital Suboxone (buprenorphine), the Street Crisis Response Team, the Street Overdose Response Team, and EMS-6.



A major change for these groups occurred in April 2023, when San Francisco became the fourth locality in the country, and the second in California, to pilot paramedics administering buprenorphine to clients who are struggling with the withdrawal symptoms of opioid addiction.

After receiving permission from the California EMS authority to allow paramedics to administer buprenorphine, Lacocque and his colleagues needed to get them trained in a procedure that is not typically within their scope of practice. "Buprenorphine is still a medication that few outside of the addiction medicine and ED realm are familiar with, but the paramedics have been absolutely great in adapting this new skill," says Lacocque.

A companion challenge is a logistical one. In San Francisco, patients who have overdosed don't all arrive at the same hospital, and the clinical staff of each hospital has different levels of familiarity with and belief in the value of buprenorphine. In addition, sometimes incompatible software makes it difficult to track these patients across city locations.

"Implementing prehospital buprenorphine is one of the most difficult, most resource-intensive projects we've done, but it's essential because for this program to be fully successful, every link in the chain has to work.

JEREMY LACOCQUE, DO



In addition, the ZSFG ED has hired a full-time substance use navigator to ease the burden on social workers for connecting

Glide Overdose Awareness Day Event: On August 30th, Section Chief Michael Mason was invited by Glide to represent the Fire Department and speak alongside City and community leadership during an Overdose Awareness Day event which included a resource fair, food, games, and overdose education. Joined by Department PIO Capt. Baxter and SORT Community Paramedic Richard Platt, Department members joined with Glide staff, City leaders, faith leaders and community members to recognize those lost to drug overdoses while voicing our support for the ongoing programs and providers working for positive change in our community.



Above: Section Chief Mason, Eileen Loughran (DPH, Director, Office of Overdose Prevention), Krista Gaeta (DPH, Director of Strategic Initiatives, Population Behavioral Health Services), Dr. Grant Colfax (DPH, Director), Capt. Baxter, Community Paramedic Platt

Life Line Non-profit Helps the Elderly: On August 13, Dr. Graterol and Assistant Deputy Chief Pang witnessed the gratitude from elderly residents at 737 Folsom Street, as they eagerly signed up for the Life Line program.



Paramedic Melia Oldman and Hazel Tam. Photos used with permission.

Life Line, a nonprofit founded by two dedicated community paramedics, Emily Tam and Nick Koo, has made a significant impact on the non-English speaking elderly community since its inception in March 2023. Life Line volunteers, many of them bilingual, help seniors fill out a one-page medical record that includes their medical history, medications, drug allergies, primary care providers, and emergency and family contacts. This record is neatly housed in a plastic sleeve and affixed to the resident's refrigerator door, with a visible sticker placed on their front door to alert first responders to the presence of this vital information. The volunteers, who are firefighters, paramedics, EMTs, and community paramedics of the SFFD, as well as volunteers from the private ambulance companies, were met in the lobby and hallways by residents who had been expecting their arrival.



Life Line has quickly gained momentum and recognition. The Salvation Army, Chinese Hospital, and the non-profit Self Help for the Elderly, have all requested Life Line for the seniors they serve. To date, there are approximately 2,000 participating seniors and approximately 50 providers that have volunteered their time.



EMS-6

Operational period: 8/1/2024 – 8/30/2024

Total encounters: 247

Average encounters per day: 8.23

Utilization changes of top 20 utilizers engaged by EMS-6 from month before the operational period to current: -65.21%

Encounter Type*	Number
Consult	90
In Person Visit	108
Case Conference	6
Show of Support	8
Care Coordination	24
Interagency Support	1
Chart Review	10
Total	247

EMS-6 Successes & Challenges:

- Vulnerable Unhoused Senior Care Coordination:** On August 27th, EMS-6 Captain Ben Sosin responded to a special call from Medic 552 to support a high-utilizer who was found on the sidewalk. The individual, a 62-year-old male experiencing homelessness, had 28 encounters with SFFD personnel year-to-date. Captain Sosin responded to the hospital emergency department and assessed the individual. After conducting a chart review, Captain Sosin recognized that the individual had been increasingly engaged by SFFD personnel in the last two weeks and was often found soiled. He contacted the individual's case manager and, together with the hospital social worker, advocated for an involuntary mental health on the basis of grave disability. As a result, a hold was placed by ED staff and the client was admitted to the hospital for stabilization and further evaluation. This advocacy is possible because of the coordinated care: the ambulance members that requested EMS-6, access to integrated healthcare records, and collaboration among outpatient, hospital, and pre-hospital care providers.
- High-Utilizer Connected to Residential Treatment:** On August 13th, a SFFD ambulance responded to a 26-year-old housed female with a history of alcohol use disorder and 17 911 engagements in the previous 12 months. The ambulance personnel called EMS-6 Captain Eddy Bird when the patient stated that she had previously been in a residential treatment program. Captain Bird called the treatment program and was told that the program would welcome her back, but that typically a hospital would arrange for her to be transported to the facility by taxi, only for her to divert the taxi to a liquor store. After confirming that the treatment program would hold a bed for her, Captain Bird called the ED social worker at the hospital she had been transported to and asked that EMS-6 be called at the time of discharge. The patient was treated and stabilized over night, and the next morning, ER staff called EMS-6 Captain Ben Sosin. Captain Sosin then called a taxi, instructed the taxi driver to go straight to the treatment program, followed the taxi to the treatment program in his department vehicle, and personally walked her through the door. This is another example of care coordination beginning with SFFD ambulance personnel and concluding with a warm hand off of a community paramedic.

SCRT

Operational period: 8/1/2024 – 8/31/2024

Total Calls for Service: 1,184

Average Response Time: 17.36

Average on Scene Time: 41.39

Disposition All Calls for Service

Non-ambulance transport to non-ED resource	209	17.65%
Ambulance transport to ED	207	17.48%
Remained in the community	525	44.34%
Unable to Locate & Walked Away	243	20.52%
Total	1184	100.00%

Disposition Engaged Individuals Only

Non-ambulance transport to non-ED resource	209	22.21%
Ambulance transport to ED	207	22.00%
Remained in community	525	55.79%
Total	941	100.00%

5150

Grave disability	21
Danger to Self	16
Danger to Others	8
Total*	38

*As individuals may be placed on a hold for multiple reasons the total will not reflect the sum

Police Presence on Scene

		Percent of total calls for service (1184)
PD On Scene Prior to Arrival	9	0.76%
PD requested by SCRT	9	0.76%
SCRT requested by PD	316	26.69%
Total Incidents with PD present on scene	334	28.21%

SCRT Successes

- **Individual reunited with family:** SCRT was requested by SFPD to assist a young woman experiencing homelessness. SCRT2 members Community Paramedic Talia Kurpieski, EMT Scott Ward, and Homeless Outreach Team (HOT) member Juliet Dinkins responded

and discovered that she had been in San Francisco for one month, living on the street, without resources or friends. She appeared anxious, scared, and at times paced back and forth. They offered her food and water, began the gentle process of gaining her trust, and determined that she was from a Southern state and wanted to go home. Captain Patrick Renshaw called Journey Home to ask if she qualified for relocation, and was told that someone would call her to start intake. While waiting for the Journey Home intake administrator to call back, Captain Renshaw reports how the individual became increasingly anxious and how the SCRT personnel would calm her down, then give her space when it seemed necessary, to keep her there and engaged. When Journey Home did call, and began the intake, her phone battery began to die, causing her more anxiety. HOT member Juliet quickly grabbed her own portable charger, to give the individual's phone a charge. Paramedic Kurpieski spoke with the individual's mother, who had reported her daughter missing, and assured her that they would do everything possible to get her daughter home. The SCRT members then drove the individual to a woman's shelter, where they met social workers from the Health Department. That evening, she boarded a bus, and it has been reported that she arrived, safe and sound, to her home, and reunited with her mother.

SORT

Operational period 8/1/2024 – 8/31/2024

Calls for Service: 103

SFFD Suboxone Starts: 6

Provider	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	YTD (2024)	YTD % (2024)
AMR	0	0	0	0	0	0	0	0	0	0%
King American	0	2	0	0	0	0	0	0	2	5%
SFFD	4	11	10	9	6	3	9	6	52	96%
<i>SORT</i>	3	2	3	1	0	0	2	1	11	21%
<i>SCRT (inc CP5)</i>	0	0	0	1	0	0	1	2	2	4%
<i>Medic Units / EMS</i>	1	9	7	7	6	3	6	3	39	75%
Grand Total	4	13	10	9	6	3	9	6	54	100%

Disposition All Calls for Service

Non-ambulance transport to non-ED resource	8	7.02%
Ambulance transport to ED	30	26.32%
Remained in the community	65	57.02%
Unable to Locate & Walked Away	11	9.65%
Total	114	100.00%

Disposition Engaged Individuals Only

Non-ambulance transport to non-ED resource	8	7.77%
Ambulance transport to ED	30	29.1 3%
Remained in community	65	63.11%
Total	103	100.00%

SORT Successes:

- **SCOPE Pilot Referrals:** In August, three (3) successful referrals were made to the SCOPE pilot program, located at the Sobering Center (Sobering Center Overdose Prevention and Education). The SCOPE pilot, described in detail in the July Fire Commission Report, has continued to be a successful low-barrier resource for individuals with substance use disorder seeking connections to care.

Notable outcomes of referrals to SCOPE include:

- Client was induced on buprenorphine (first dose) and received ongoing prescription,
- Client discharged to medical detox,
- Client discharged with linkage to Ward 93 methadone clinic (ZSFGH),
- Client continued medication assisted treatment with buprenorphine after receiving first dose in field from SORT.

We wish to acknowledge our continued partnership with the Department of Public Health, especially the Community Paramedicine Division's long relationship with the Sobering Center, that has supported this pilot's launch and growth.