

MIH: Transport to Stabilization Care Center (SCC)

Effective: 12-09-23

PURPOSE

The Boston EMS Transport to the Boston Medical Center Stabilization Care Center (BMC SCC) program will assist with recovery for patient populations experiencing substance use disorder by avoiding emergency department visits, and by instead offering services of the BMC SCC. The purpose of the Transport to SCC program is to promote accessible entry to substance use disorder (SUD) services for immediate treatment and linkage to further care. This prioritizes EMS resources for patients in more critical condition, decreases medically unnecessary emergency department visits, and improves patient care coordination.

BACKGROUND

Boston EMS secured approval through the State Department of Public Health, Office of Emergency Medical Services, Mobile Integrated Health Care (MIH) with Emergency Department Avoidance program, to transport substance use disorder (SUD) patients that meet criteria to the BMC SCC.

In partnering with BMC for this component of the MIH program, on-scene Boston EMS crews will screen substance use-related calls to determine patient qualification for physician evaluation, for consideration of alternative destination transport. If the patient meets criteria and consents to speaking with a physician, the EMS crew will utilize BMC Medical Control for evaluation. The physician may then determine that the patient is appropriate for ED avoidance, and for alternative transport to the SCC. With the patient's written consent, they will be transported with warm handoff to the facility. The patient may choose at any time to be transported to an ED.

The SCC is a judgement-free substance use disorder (SUD) and behavioral health (BH) 24-hour short-term stay urgent care program that medically stabilizes individuals and assists them with entry into housing. The SCC offers low-barrier services including SUD/BH treatment navigation, medication for addiction treatment, and supported sobering. Patients are provided with acute treatment for substance use disorder and behavioral health needs by addressing acute withdrawal, sedation, agitation, and substance-induced psychosis and connected with outpatient services and transitional housing. As operational partners, Boston EMS will utilize the SCC as an alternative destination for patients who meet certain criteria.

PROCEDURE

Any unit with at least one member trained for transport to the SCC may implement this procedure for patients within the BMC catchment area.

- A. If upon review of a patient's condition, the Boston EMS crew determines the patient is experiencing a substance use disorder-related complaint and meets the inclusionary criteria listed below, they may initiate the Mobile Integrated Health (MIH) Transport to Stabilization Care Center (SCC) program, with the patient's consent. The SCC is a

resource to assist patients suffering from homelessness/housing instability and substance use disorder, either acute intoxication or withdrawal.

- B. The patient must meet each of the following criteria, ensuring they are in a stable condition:
 - 1. The patient is 18 years or older
 - 2. Can communicate, able to give informed consent to transport to alternative facility, and able to decline transport to emergency department
 - 3. Not suffering from acute medical, surgical, or orthopedic emergency
 - 4. Temp < 100.4 F
 - 5. SPO2 \geq 92% (on room air)
 - 6. HR \geq 50 and < 120 bpm
 - 7. BP \geq 100/P
 - 8. BS \geq 70 mg/dl
 - 9. Denies syncope today, chest pain, or shortness of breath
 - 10. Not post-ictal or exhibiting signs of stroke
 - 11. Not pregnant >20 weeks
 - 12. Not expressing suicidal or homicidal intent
 - 13. Not restrained or exhibiting violent behavior
 - 14. Not banned from the SCC
- C. If the SCC does not have capacity, the SCC will call Dispatch Operations indicating they do not have capacity and call back when they are accepting patients again.
 - 1. If Dispatch Operations is alerted that there is no capacity, the dispatcher will announce this over the radio to make crews aware.
 - 2. If the crew is unsure of whether the SCC has capacity, they will radio Dispatch to confirm.
 - 3. If capacity does not exist, and the crew has determined that a patient meets criteria, the crew will transport to the ED.
- D. Patients who meet all criteria for the MIH program will be verbally informed of the option for participation, what the program will entail, and the right to opt for transport to an emergency department at any point, as well as the fact that the patient will only be taken to the SCC after consultation with a physician and if they have availability. The patient must provide verbal consent prior to initiation of the BMC medical control.
 - 1. If the patient does not provide verbal consent, the crew will document this appropriately in the ePCR note, and transport to the ED.
- E. If the criteria are met, the SCC has capacity, and the patient has verbally consented, the crew will contact BMC medical control.
 - 1. The crew will state that the call is for consult regarding transport to SCC.
 - 2. The crew will work with the physician to gather any additional information or assessments.
- F. The Boston EMS crew, patient, and BMC Medical Control provider will have a brief consultation and reach consensus on the most appropriate disposition for the patient, including transport to an ED, or transport to the SCC.
- G. The Boston EMS crew will document the employment of the MIH program as part of the patient interaction, as well as complete an ePCR note.
 - 1. If ED transport is determined to be the best option, the crew will immediately proceed with traditional ambulance transport to the ED.

2. If the determination is made to transport to the SCC, the crew will document an ePCR for the patient encounter and list '891 SCC' as the destination in the ePCR.
- H. The crew will obtain written consent from the patient in the ePCR note that they have agreed to be transported.
 - I. The front access door to the BMC SCC is open from the hours of 0900-1700. Outside of those hours, security at the front desk will buzz providers in.
 - J. On arrival to the SCC, the crew will inform security at the lobby front desk that they have arrived with a patient and ask for a Triage Registered Nurse. A member of the nursing team will meet the crew in the lobby and a warm hand-off will occur with patient transitioned to a wheelchair. The ePCR note will be faxed to the SCC to complete the transition of care.
 - K. Basic triage report to include name, DOB, location patient found, patient condition, substance(s) used or history of recent substance use, any treatment or medications administered prior to arrival, and vital signs, along with verifying inclusion criteria with the Registered Nurse.
 1. In the event that the SCC does not accept the patient on arrival, the crew will notify Dispatch Operations and document the new destination.