





Update on Act 208 Transition and Community Paramedic Program

Presented By:

James H.E. Ireland, MD, Director

Ian T.T. Santee, Deputy Director

Kathy S. Higa, Acting Branch Chief



# Act 208

SECTION 16. Section 321-234, Hawaii Revised Statutes, is amended by amending subsection (b) to read as follows:

"(b) The moneys in the special fund shall be [used by] distributed as follows:

Beginning with fiscal year 2021-2022, \$3,500,000 shall be distributed each fiscal year to a county operating a county emergency medical services system pursuant to part of chapter 46 for the operation of that system; and The remainder shall be distributed to the department for operating [a state comprehensive emergency medical services] the system established pursuant to this chapter, including enhanced and expanded services, and shall not be used to supplant funding for emergency medical services authorized prior to [[]July 1, 2004[]]."

SECTION 18. (a) The transition of all rights, powers, functions, and duties of the department of health under part XVIII of chapter 321, Hawaii Revised Statutes, that are exercised within the island of Oahu are hereby transferred to the city and county of Honolulu and the transition shall commence on July 1, 2021. The transition of the rights, powers, functions, and duties of the department of health pursuant to part I, to the city and county of Honolulu shall be completed no later than June 30, 2024.

(b) Funding for the transition and maintenance of the rights, powers, functions, and duties of the department of health pursuant to part I, to the city and county of Honolulu shall be allocated as follows:



# CITY AND COUNTY OF HONOLULU Ambulance Fees

**§46- Emergency medical services; fees.** (a) The county may establish reasonable fees to be collected from individuals who are:

Transported by emergency ground ambulance services to a health care facility within the county designated by the county for the care of the individual;

Provided health care by emergency medical services personnel with- in the county but not transported by ground ambulance to a health care facility; or

Provided care by the community paramedicine program.

No ambulance services, or any other emergency medical services available from or under the authority of this part shall be denied to any person on the basis of the ability of the person to pay or because of the lack of prepaid health care coverage or proof of the ability to pay or coverage.

The county may adopt rules pursuant to chapter 91 necessary to effectuate the purposes of this section.



DAVID Y. IGE



ELIZABETH A. CHAR, M.D. DIRECTOR OF HEALTH

STATE OF HAWAII DEPARTMENT OF HEALTH P. O. BOX 3378 HONOLULU, HI 96801-3378

In reply, please refer to: File: EMS 22-191-1

November 15, 2022

Dear Ambulance Service Providers:

Effective January 1, 2023, the State of Hawaii, Department of Health will increase the fees for emergency ambulance services. The fee increase of 10% is authorized pursuant to the Hawaii Administrative Rules, Title 11, Chapter 72.

The new adjusted emergency ambulance service rates are as follows:

Procedure	Level of Service	Adjusted Rate		
A0427	Advanced Life Support 1	\$2,240.00		
A0429	Basic Life Support	\$1,995.00		
A0431	Rotary Wing	\$11,350.00		
A0433	Advanced Life Support 2	\$2,240.00		
A0434	Specialty Care Transport	\$2,240.00		
A0425	Mileage	\$28.00		

Should you have any questions, please contact the Emergency Medical Services and Injury Prevention System Branch at 808-733-9210 or email <a href="mailto:emsipsb@doh.hawaii.gov">emsipsb@doh.hawaii.gov</a>.

Sincerely,

Elizabeth A. Char, M.D. Director of Health



# FY 22 Transition

(1) For the first year of the transition (fiscal year 2021-2022), the City and County of Honolulu shall be reimbursed for fiscal year 2021- 2022 emergency medical services operational expenses, up to \$46,171,411, and the amount specified in section 321-234(b), Hawaii Revised Statutes, from the emergency medical services special fund for the operation of an emergency medical service system in the City and County of Honolulu. Any additional costs shall be borne by the City and County of Honolulu. The department shall continue to provide all emergency service medical billing and collections for the city and county of Honolulu with all moneys received deposited in the State's general fund;



# FY 23 Transition

(2) For the second year of the transition (fiscal year 2022-2023), the city and county of Honolulu shall retain all the amounts it receives from billing for its services, receive \$8,904,499, and receive the amount specified in section 321-234(b), Hawaii Revised Statutes, from the Emergency Medical Services special fund for the operation of an emergency medical services system in the City and County of Honolulu. Any additional costs shall be borne by the City and County of Honolulu;



# FY 24 Transition

(3) For the third year of the transition (fiscal year 2023-2024), the City and County of Honolulu shall retain all the amounts it receives from billing for its services, receive \$4,452,249, and the amount specified in section 321-234(b), Hawaii Revised Statutes, from the Emergency Medical Services special fund for the operation of an emergency medical services system in the City and County of Honolulu. Any additional costs shall be borne by the City and County of Honolulu; and



# FY 25 Forward

(4) Every year thereafter, the City and County of Honolulu shall continue to retain all the amounts it receives from billing for its services and the amount specified in section 321-234(b), Hawaii Revised Statutes, from the Emergency Medical Services special fund as the State's share pursuant to section 5 of article VIII of the Constitution of the State of Hawai'i, and receive no additional funds from the State's general fund for the operation of an Emergency Medical Services system in the City and County of Honolulu. Any additional costs shall be borne by the City and County of Honolulu.



# **Customer Services**

**EMS Reports/Billing** 

For information about obtaining an EMS Report on the island of Oʻahu, please contact:

City and County of Honolulu Emergency Medical Services Custodian of Records 3375 Koapaka Street, Suite H450 Honolulu, HI 96819

Billing Inquiries: 808-501-0541

Record Inquiries: 808-723-7980

Fax: (808) 723-7916



# CITY AND COUNTY OF HONOLULU Medicare

CONTRACTOR/ CARRIER	LOCALITY	HCPCS	RVU	GPCI	BASE RATE	URBAN BASE RATE / URBAN MILEAGE	RURAL BASE RATE / RURAL MILEAGE	RURAL BASE RATE / LOWEST QUARTILE	RURAL GROUND MILES 1-17*
01212	01	A0425	1.00	1.146	\$8.54	\$8.71	\$8.80	n/a	\$13.20
01212	01	A0426	1.20	1.146	\$265.54	\$358.24	\$361.75	\$443.51	n/a
01212	01	A0427	1.90	1.146	\$265.54	\$567.21	\$572.77	\$702.22	n/a
01212	01	A0428	1.00	1.146	\$265.54	\$298.53	\$301.46	\$369.59	n/a
01212	01	A0429	1.60	1.146	\$265.54	\$477.65	\$482.33	\$591.34	n/a
01212	01	A0430	1.00	1.146	\$3,603.48	\$3,866.53	\$5,799.80	n/a	\$5,799.80
01212	01	A0431	1.00	1.146	\$4,189.59	\$4,495.43	\$6,743.15	n/a	\$6,743.15
01212	01	A0432	1.75	1.146	\$265.54	\$522.43	\$527.55	n/a	n/a
01212	01	A0433	2.75	1.146	\$265.54	\$820.96	\$829.01	\$1,016.37	n/a
01212	01	A0434	3.25	1.146	\$265.54	\$970.23	\$979.74	\$1,201.16	n/a
01212	01	A0435	1.00	1.146	\$10.23	\$10.23	\$15.35	n/a	\$15.35
01212	01	A0436	1.00	1.146	\$27.28	\$27.28	\$40.92	n/a	\$40.92



# CITY AND COUNTY OF HONOLULU Billable Trips

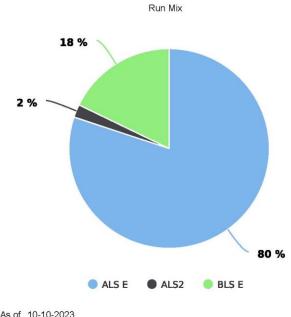
#### BILLABLE TRIPS

Within the Billable Trips section, a user can obtain data on trips within specific date of service ranges. A trip is considered billed if it has moved through the initial billing process and is ready to be sent to a payer, has already been sent to a payer, or has been paid and closed. The only trips that are not considered billed are those that have not been imported into the billing system, have been canceled, or have not finished the initial billing process.

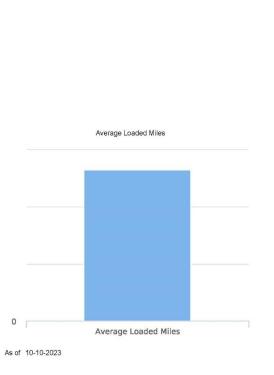
Listed under the Billable Trips heading, a user can select the option to review billed trip data that is based on date of service for the month to date period (MTD), fiscal year to date period (YTD), or for the previous 12 month rolling period (12M). In this section, users can drill into and review data at the trend, snap shot and trip level.

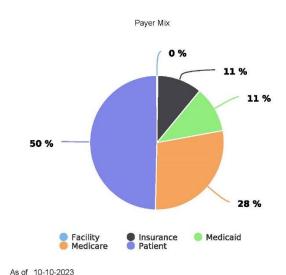


# **CITY AND COUNTY OF HONOLULU** Billable Trips











# CITY AND COUNTY OF HONOLULU Gross Charges

#### **GROSS CHARGES**

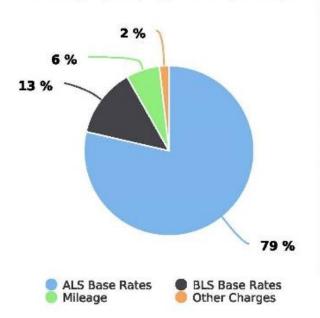
Within the Gross Charges section, a user can obtain data on gross charges within specific billing periods. A trip will only have gross charges added once it has completed the initial billing process.

Listed under the Gross Charges heading, a user can select the option to review gross charge data that is based on billing period(s) for the month to date period (MTD), fiscal year to date period (YTD), or for the previous 12 month rolling period (12M). In this section, users can drill into and review data at the trend, snap shot and trip level.



# CITY AND COUNTY OF HONOLULU Gross Charges

Gross Charges by Charge Type and Charge Description



Sum of Total				
Charge Type	Charge Description	Total		
ALS Base Rates	A2 Comprehen Transport - HONO	3,200,332.00		
	ALS Emerg Transport - HONO	121,516,240.00		
	Special Care Transport - HONO	2,036.00		
ALS Base Rates Totals		124,718,608.00		
BLS Base Rates	BLS Emerg Transport - HONO	20,956,413.00		
BLS Base Rates Totals	20,956,413.			
Mileage - HONO		10,113,983.60		
Mileage Totals	Mileage Totals			
Other Charges	ALS Treat No Transport - HONO	- 126,990.00		
	BLS Treat No Transport - HONO	- 81,780.00		
	DOA Transport - HONO	3,127,553.00		
	Interest Charge	0.01		
Other Charges Totals	2,918,783.01			
Grand Total	158,707,787.61			

# CITY AND COUNTY OF HONOLULU Accounts Receivable

#### **ACCOUNTS RECEIVABLE**

Within the AR section, a user can obtain data on accounts receivable balance information based on current payer and aging bucket. The Accounts Receivable balance is the sum of all open trip balances. Only open trips are included in this calculation and therefore trips with a zero balance, closed trips, will not be included in this section.

Listed under the AR heading, a user can drill down to review a summary aging report by current payer and aging bucket. The user can further drill into any specific aging bucket to review trip level details.

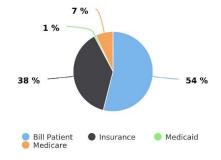


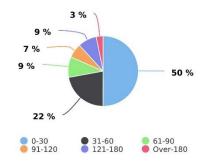
#### Aging Report

Account Receivables Aging by Current Payor Report (Aging Date Based)

Honolulu EMS

			200	and the same			
Current Payor	Current	31-60	61-90	91-120	<u>121-180</u>	Over 180	Total
Bill Patient	36,681,947.73	21,036,001.08	10,384,735.39	7,161,252.54	699,494.68	1,984,217.54	77,947,648.96
Insurance	29,416,124.87	9,060,807.70	2,258,108.17	1,892,706.48	10,774,009.74	1,883,853.00	55,285,609.96
Medicaid	929,034.43	53,705.51	2,296.00	0.00	2,186.00	0.00	987,221.94
Medicare	5,334,494.03	1,704,071.12	978,499.14	461,648.90	998,035.00	750,916.00	10,227,664.19
Total	72,361,601.06	31,854,585.41	13,623,638.70	9,515,607.92	12,473,725.42	4,618,986.54	144,448,145.05







# CITY AND COUNTY OF HONOLULU Net Collections

#### **NET COLLECTIONS**

Within the Net Collections section, a user can obtain data on net collections within specific billing periods. Net Collections is the sum of all payments less refunds applied during the same period(s).

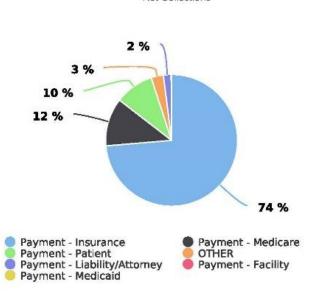
Listed under the Net Collections heading, a user can select the option to review net collection data that is based on billing period(s) for the month to date period (MTD), fiscal year to date period (YTD), or for the previous 12 month rolling period (12M). In this section, users can drill into and review this net collection data at the trend, snap shot and trip level.



# **Net Collections**

Credit As Type Summary Report (Deposit Date)





#### Honolulu EMS

Credit Type/Credit Code	Transaction	<u>Dollars</u>
Payment		
Payment - Insurance	28,813	3,726,146.66
Payment - Medicare	3,885	599,708.81
Payment - Patient	705	482,894.85
Payment - Credit Card	186	124,291.72
Payment - Liability/Attorney	131	96,920.87
Payment - Insurance - CC	50	26,390.29
Payment - Patient - ACH	32	16,238.34
Payment - Facility	20	6,055.34
Payment - Attorney	4	4,417.70
Payment - Medicaid	158	262.11
Interest Payment (+)	87	163.71
Payment - GEMT Program	6	0.00
Payment - Transfer	2	0.00
Recoupment (-)	28	-19,723.81
Totals For Type	34,107	5,063,766.59
Refund		
Refund - Patient	2	-1,390.78
Totals For Type	2	-1,390.78



# AMR Calls

	ALL AMR Requests	ALS Calls (911) B/U	ALS Responses	ALS T-ports	ALS Turndown	CONTRACT ALS Calls	CONTRACT BLS Calls	BLS Calls (Cold)	BLS Responses	BLS T-ports	BLS Turndown
2018	4419	1715	1163	728	428	407		2297	1312	816	892
2019	4237	1040	654	419	362	43	1714	1440	2598	1633	693
2020	3807	739	520	327	271	124	1535	1409	2323	1542	569
2021	3827	1333	1253	646	334	1004	1200	290	1511	1024	966
2022	4089	1365	1296	523	116	2721	0	3	2928	313	881
Q1-3 2023	3101	1681	1644	765	38	1420		0	3889	579	244

Year	Total Responses	Total Transports	Refusals	Cancellations	DOAs	ALS T-ports	BLS T-ports
2019	3252	2052	261	343	6	419	1633
2020	2843	1869	315	600	6	327	1542
2021	2764	1670	467	815	19	646	1024
2022	4224	836	856	1104	35	523	313
Q1-3							
2023	5533	1344	816	1450	16	765	579



CRISIS, OUTREACH, RESPONSE, AND ENGAGEMENT (C.O.R.E.) PROGRAM & Medical Respite

DECEMBER 1, 2021 - PRESENT



### C.O.R.E.'s Mission

- Through collaboration with an array of City programs, C.O.R.E.'s services and street outreach efforts provide resources and comprehensive coverage to all people experiencing unsheltered homelessness.
- C.O.R.E. responds to and follows up with community crisis calls that are nonviolent and do not require emergent medical assistance.









## C.O.R.E.'s Values

- To engage and improve the quality of life for all people through compassion, empathy, and professionalism
- Effectively and respectfully work with internal and external partners to foster continuum of care for consumers
- To enhance the quality of services provided by receiving regular training in evidence-based practices such as trauma-informed care and crisis prevention intervention
- To utilize a person-centered and culturally responsive approach, focused on the consumer's strengths and resources









## Services of C.O.R.E.

#### Housing

Short-term and long-term facilities

#### Document assistance

 Identification (ID) cards, birth certificates, social security cards, passports, Visas, and etc.

#### Medical

Wound care, transportation to other outreach services/hospital facilities, and etc.

#### Financial

 Supplemental Nutrition Assistance Program (SNAP)/Electronic Benefits Transfer (EBT), and etc.

#### Continuum of Care

 Linkage to existing service providers and multi-agency collaborative partnerships for consumer continuum of care



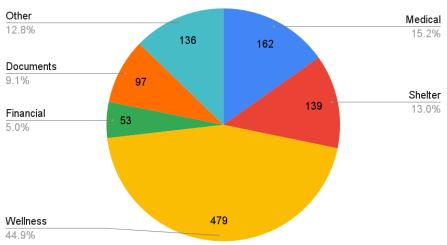
# CHW Outreach Definitions

#### **Definitions:**

- Medical: Wound care, SUD treatment, refer to EMS/EMT, etc.
- **Shelter**: All housing related inquires
- Wellness: General follow-up and rapport building
- **Documents**: social security care, state ID/license, birth certificate, bus pass, etc.
- Financial: All money related inquires, SSDI/SNAP, and GA
- Other: Continuum of Care with any other agencies and office hours

Total Outreaches Dec 21 - Dec 22 (n=1066)





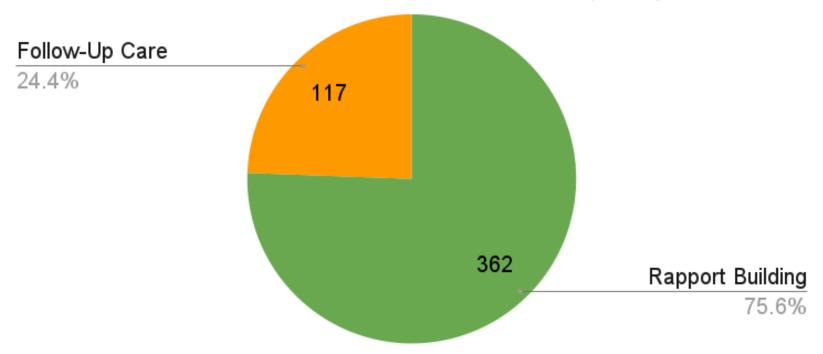






### Wellness Encounters

Wellness Encounters from Dec 21 - Dec 22 (n=479)



This graph is based upon the interactions C.O.R.E. has with consumers in regards to their reported needs for wellness broken into two categories: Follow-Up Care and Rapport Building.

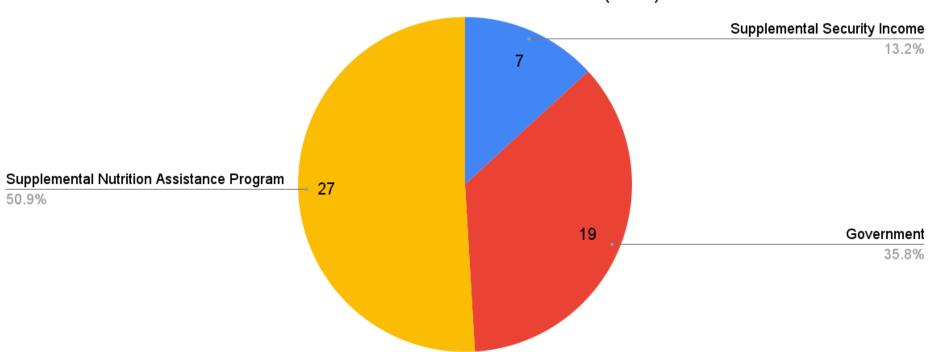






## Financial Encounters

Financial Encounters Dec 21 - Dec 22 (n=53)



This graph is based upon the interactions C.O.R.E. has with consumers in regards to their reported needs for financial assistance broken into three categories: SNAP, SSI, and government general assistance.

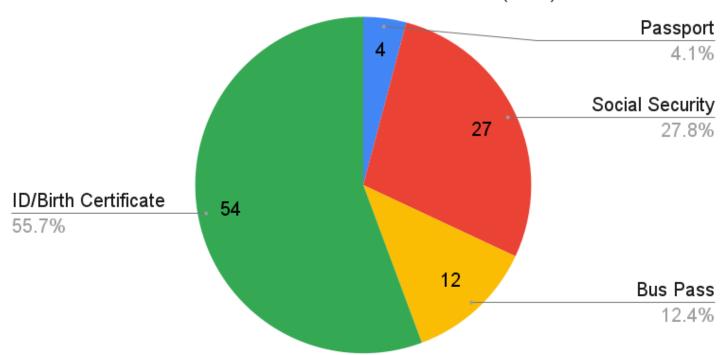






### **Document Encounters**

#### Document Encounters Dec 21 - Dec 22 (n=97)



This graph is based upon the interactions C.O.R.E. has with consumers in regards to their reported needs for document assistance broken into four categories: ID/birth certificate, passport, social security, and bus pass.

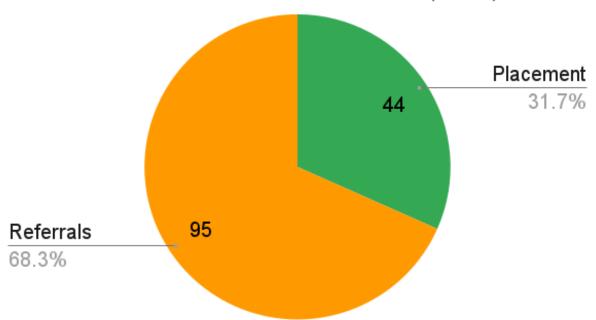






### Shelter Encounters

#### Shelter Encounters Dec 21 - Dec 22 (n=139)



This graph is based upon the interactions C.O.R.E. has with consumers in regards to their listed needs for housing, which includes calling the housing agency for availability or placing consumer in a shelter.
\*NOTE\* C.O.R.E. has housed 44 consumers in the past year. To date, 25 consumers have been discharged due to failure to

comply with facility rules, substance use, or failure to work towards housing plan.



C.O.R.E. STAFFING







## Allocation of Staff

- Community Health Workers (CHW)
  - 3.5 Administration
    - Administrator (.5), Manager, Grants, Clerical
  - **3** Field Supervisors
  - 4 Community Care Specialist II (CCS II)
  - 3 Community Care Specialist I (CCS I)
  - 4 Community Service Workers (CSW)
- Medical Personnel
  - 14 Emergency Medical Technician II
  - 2 Paramedics
  - 2 Nurses
  - 1 Physician



# Employment Growth & Consumer Encounters



#### December 1 – 31, 2021

• Administration: 2

CHWs: 3EMTs: 4

C.O.R.E. Outreaches: 69

EMT Calls: 25

#### January – March 2022

• Administration: 2

• Field Supervisors: 2

CHWs: 4EMTs: 8

C.O.R.E. Outreaches: 135

EMT Calls: 140

#### April – June 2022

• Administration: 2

• Field Supervisors: 3

CHWs: 4EMTs: 9

C.O.R.E. Outreaches: 447

EMT Calls: 184

#### July – September 2022

• Administration: 2

• Field Supervisors: 3

CHWs: 4EMTs: 12

C.O.R.E. Outreaches: 257

EMT Calls: 371

#### October – December 2022

• Administration: 2

• Managers: 2

• Field Supervisors: 2

CHWs: 7EMTs: 9

C.O.R.E. Outreaches: 158

EMT Calls: 514







#### **COMMUNITY PROCESS**

#### **OUTREACH**



C.O.R.E. hotline rings



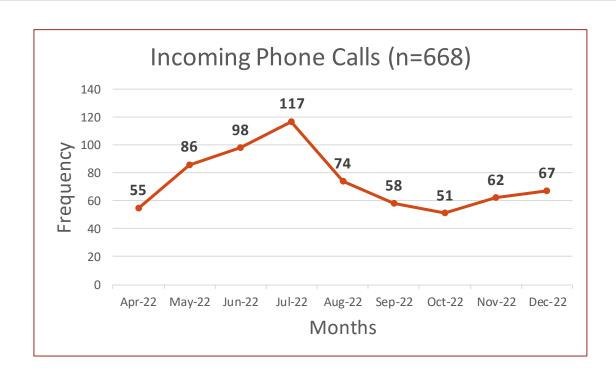
Community Health Worker (CHW) receives the call and provides the Emergency Medical Technicians (EMTs) with consumers' information and location



The C.O.R.E. ambulance then goes to assist the consumer at the given location. If social services are needed, a CHW team is dispatched.



## C.O.R.E. Hotline (Dec 21 – Dec 22)

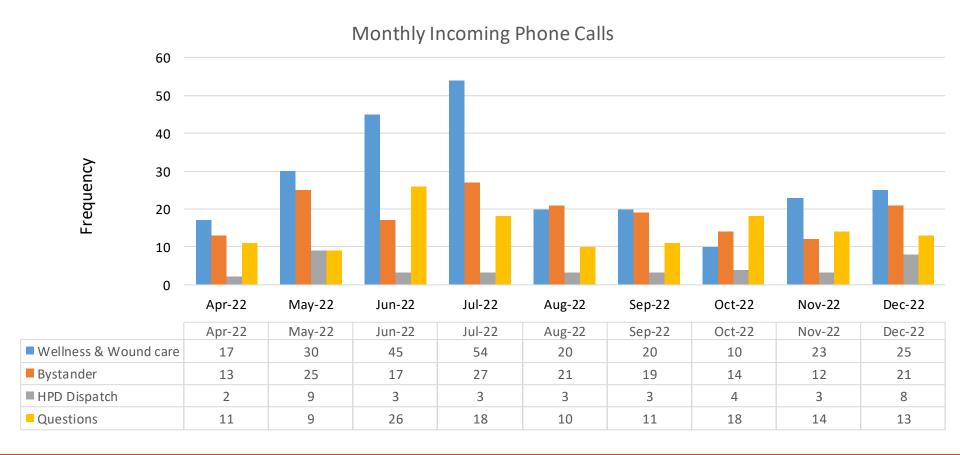


This graph shows the number of incoming phone calls each month starting in April 2022.





## C.O.R.E. Hotline Phone Calls 2022

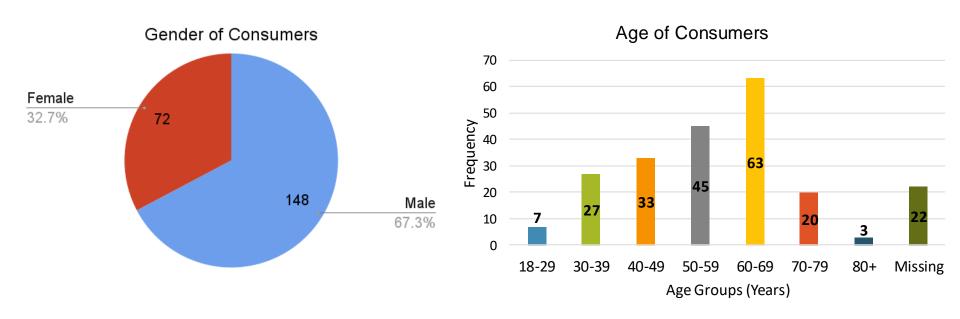




C.O.R.E. CHW Data



### Demographics of Consumers (Dec 21 – Dec 22)

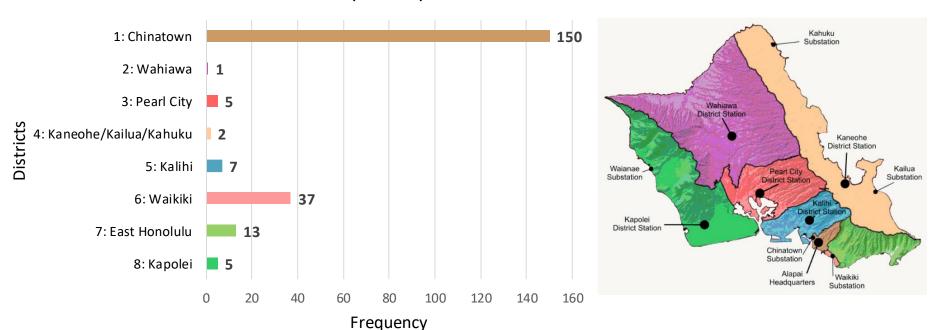


About 67% (148) of the consumers that C.O.R.E. assisted were male, and the 60-69 year age group had the largest number of consumers followed by the 50-59 year age group.



# Consumer Districts (Dec 21 – Dec 22)

#### Consumer Districts (n=220)

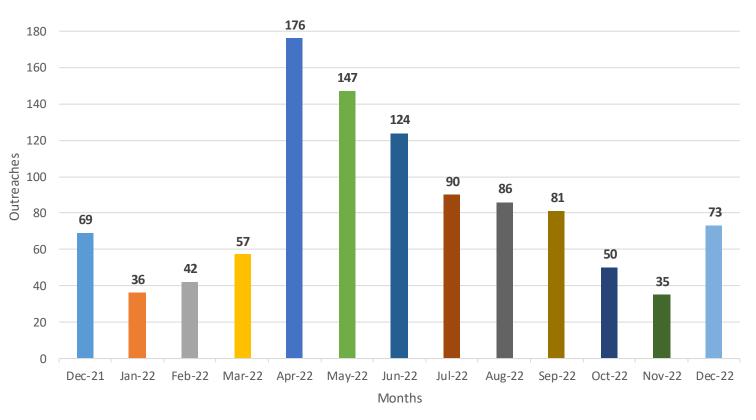


A majority of C.O.R.E.'s consumers were from the Chinatown district (150) followed by the Waikiki district (37). Some of this data may vary due to relocation of a participant after first encounter.





### Total Outreaches Per Month Dec 21 - Dec 22 (n=1066)



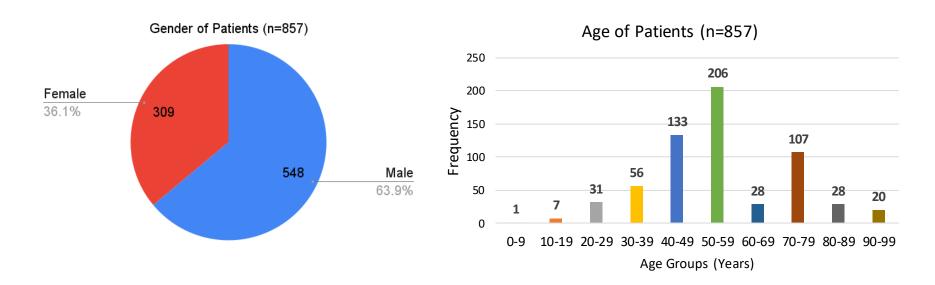
April 2022 had the highest number of outreaches followed by May 2022 and June 2022. Clients were able to express multiple needs and receive resources and support.



C.O.R.E. EMT Data



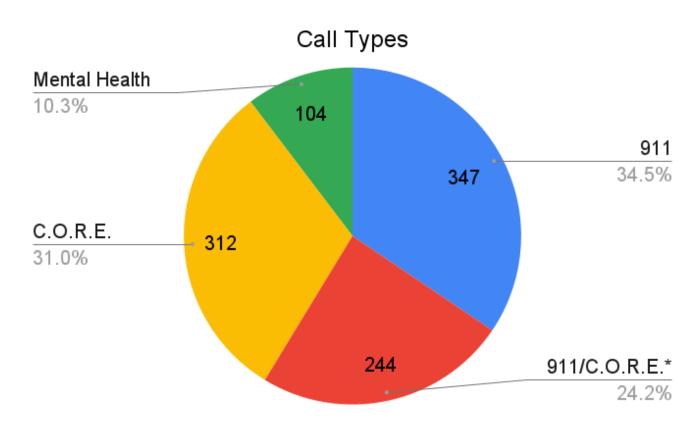
## Patient Demographics (Dec 21 – Dec 22)



About 64% (548) of the patients that C.O.R.E. assisted were male, and the 50-59 year age group had the largest number of outreaches followed by the 40-49 year age group.



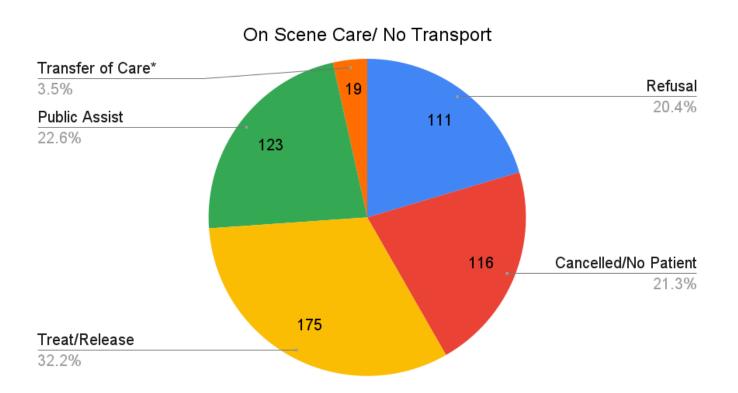
# CALL TYPE (Dec 21 – Dec 22)



\*911/CORE=911 calls for homeless individuals



## ON SCENE CARE / NO TRANSPORT (Dec 21 – Dec 22)





## HOUSING PLACEMENT & SHELTER FACILITIES





# Shelter Types

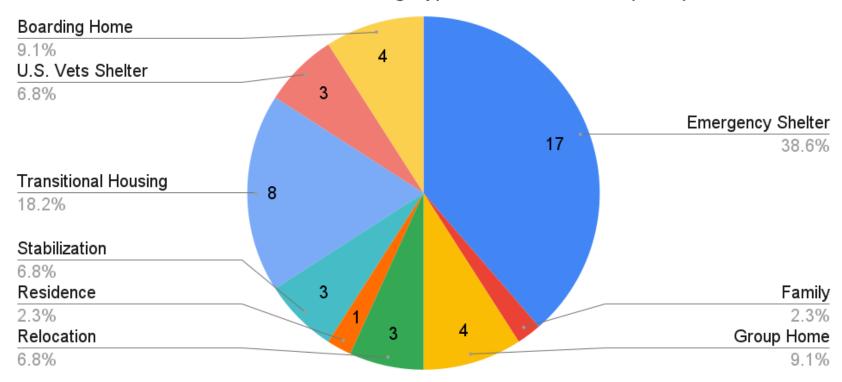
SHORT TERM FACILITIES <30 DAYS	LONG TERM FACILITIES >30 DAYS
STABILIZATION FACILITY	FAMILY RESIDENCE
EMERGENCY SHELTER	GROUP HOME
TRANSITIONAL HOUSING	BOARDING HOME
HOMELESS OUTREACH AND NAVIGATION FOR UNSHELTERED (HONU)	U.S. VETERANS SHELTER
	RELOCATION (OUT-OF-STATE)





# Housing Type

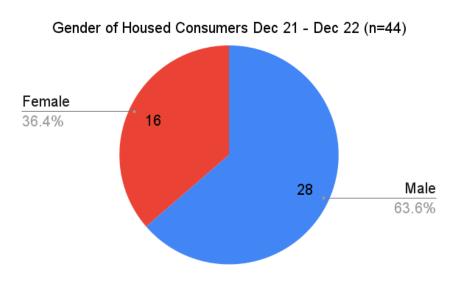
#### Consumer Placed Housing Types Dec 21 - Dec 22 (n=44)

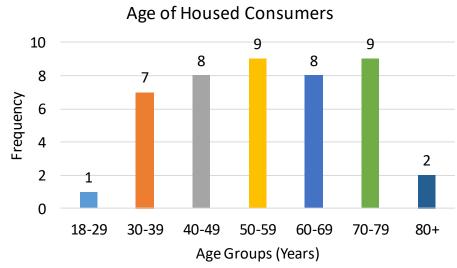


This graph is based on the 44 placed consumers that C.O.R.E. has housed over the course of the program.



## Overall Housed Consumer Demographics





About 64% (28) of C.O.R.E.'s housed population were male. The age groups 70-79 and 50-59 saw the most housed success at nine placed consumers each. The data is based on 44 housed participants.





# Consumer Unsheltered History INITIAL CONTACT WITH CORE SHELTERED



33 year old Male, unsheltered for **5 years**. C.O.R.E placed in **1 day**.

53 year old Male, unsheltered for 5 years. C.O.R.E placed in 1 day.

65 year old male, unsheltered for 6 years. C.O.R.E placed in 1 day.

62 year old Male, Unsheltered **5 years**. C.O.R.E placed in **3 days**.

66 year old male, unsheltered for **6 years**. C.O.R.E placed in **3 days**.

86 year old female, unsheltered for **6 years**. C.O.R.E placed in **3 days**.

52 years old Male, Unsheltered for 8 years C.O.R.E placed in 7 days.

57 years old Male, Unsheltered for **8 years** C.O.R.E placed in **7 days**.

71 year old male, unsheltered for **3 years**. C.O.R.E placed in **22 days**.

72 year old male, unsheltered for **14** years. C.O.R.E placed in **44 Days**.

80 year old Male, unsheltered for **26 years**. C.O.R.E placed in **49 days**.

75 year old male, unsheltered for **13** years. C.O.R.E placed in **66 days**.

80 year old Male, unsheltered for **9 months.** C.O.R.E placed in **67 days.** 

71 year old male, unsheltered for 2 years. C.O.R.E placed in 73 days

64 year old Male, Unsheltered **7 years** C.O.R.E placed in **113 days**.

49 year old female unsheltered for **18** years C.O.R.E placed in **213 days** 

51 year old Female, Unsheltered for 7 years C.O.R.E placed in 274 days

67 year old Male, unsheltered for **10 years** C.O.R.E placed in **382 days.** 



C.O.R.E. Top 6 Frequent Consumers

#### 53 yrs (Male) Unsheltered 8 yrs Needs:

- 90% of interaction is based on Wound Care and Transportation to Hospital
- 10% Encourage treatment for SUD
- Disability hinders shelter placement
- Drug abuse addiction
- Frequent EMS 911 caller

#### 67 yrs Male Unsheltered 10yrs Needs:

- 70 % of interaction is based on Documentation (SNAP, Bank Card, B.C)
- 10 % of interaction is *Wound Care*
- 20 % of interaction is *Wellness*
- Ongoing Alcohol Abuse
- Not responsible with holding documents

#### 80 yrs (Male) Unsheltered 25 yrs Needs:

- 40% of interaction is based on *Documentation (BC, SNAP)*
- 50% Continuum of Care
- 10% Document renewal

#### 71 yrs (Male) Unsheltered 5-10 yrs Needs:

- 80 % of interaction is based on *Wound Care*
- 10% unable to approach
- 10% Encourage treatment for SUD
- Severe Alcohol abuse
- Not ambulatory to meet certain shelter requirements

#### 52 yrs Female Unsheltered 16 yrs Needs:

- 90 % of interaction is based on Wellness Check
- 10 % of interaction is based on documentation (SNAP, ID)
- Severe Schizophrenia



#### 51 yrs Female Unsheltered 5 yrs Needs:

- 80% of interaction is based on Documentation (BC, SNAP)
- 20% of interaction is based on Wellness and Follow-Up
- Resident of Samoa
- Trip back to Samoa in October,
   returned back to Oahu approx.
   3 day later



#### January-May 2023 – C.O.R.E. Monthly Consumer Report

350

300

250

200 150 100

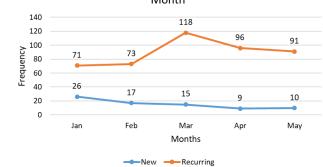
50

0

Jan

Frequency





#### **Placed Consumers**

Jan	Feb	Mar	Apr	May
3	1	2	2	2

C.O.R.E. has successfully placed 10 consumers in the past five months.

From January 2022 until May 2023, C.O.R.E. has placed 55 consumers in total.

### 316 247 231 178 184

Mar

Months

Total Outreach Needs by Month

Feb

	Jan	Feb	Mar	Apr	May	
Wellness	83	82	128	101	93	487
Shelter	23	30	44	17	24	138
Financial	8	18	33	22	13	94
Documents	15	19	34	24	6	98
Medical	27	14	33	43	58	175
Other	22	21	44	40	37	164
	178	184	316	247	231	1156

Apr

May

From January to May 2023, C.O.R.E. community health workers addressed 1,156 needs. The category that C.O.R.E. addressed the most is Wellness. This category includes building rapport such as greetings and check-ins and/or following up with other needs or the status of other pending needs.





## Iwilei Resource Center (IRC)

As of June 2023, we operated a medical respite with basic capabilities.

We will not accept clients with:

- Medical need that exceeds IRC Care capacity
- Mental Health concerns that exceeds IRC care capacity
- Untreated Mental Health concerns
- Behavioral or violence concerns
- Individuals just wanting shelter with no medical concerns

















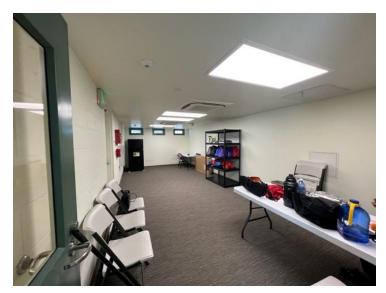






































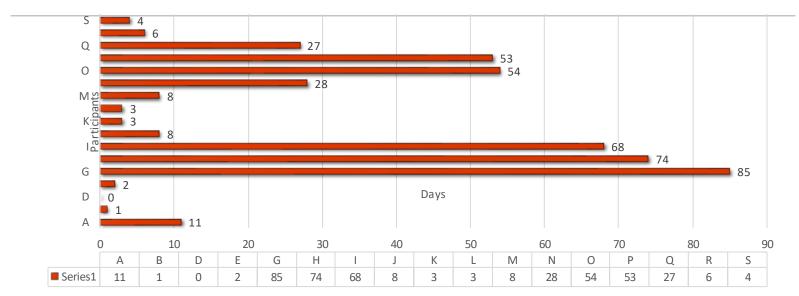








#### **Length of Stay**



Graph reflect the length of stay for each participant that has been approved for IRC medical respite.

Of the 19 approved participants, 13 admissions are C.O.R.E participant and 6 admissions are hospital referrals.

To date, all participants who have left the IRC, Voluntarily discharged/ AMA. Administrative discharge has never been applied.

Reasons for AMA varied with participants. 1 female returned back to her family in Maui.

#### City and County of Honolulu

Crisis Outreach Response and Engagement (C.O.R.E.) Program Medical Respite

**June-October 2023** 

A Monthly Consumer Report

Data is current as of October 31, 2023





92 Total Referrals



19 Participants APPROVED for Respite Services



73 referrals DENIED for needing higher level of care or mental health or substance use concerns exceeds facility capacity



**0 PENDING** Assessment

**Gender of Referrals** 

80% Males 20% Females

#### Current Status as of 11/14/23

- 4 Clients Remain
- 2 Pending housing
- 2 Need Foster Care



Thank you! Questions?