**THE PROBLEM**
When someone calls 911 for non-emergency reasons, the fire department responds even when the situation may not require emergency attention. This traditional system can be costly in a number of ways: vital resources become unavailable to respond to more urgent calls, the underlying patient needs are not addressed, and patients are not properly connected with the community groups or organizations that can provide appropriate care solutions.

**THE SOLUTION**
The Mobile Integrated Health (MIH) team responds to people who have requested or been referred for service but likely don’t require emergency care. The MIH team performs a medical assessment, determines needs, and helps connect the patient with the appropriate care solution in the community.

**WHO IS HELPED?**
- Under-served residents
- Frequent 911 callers/users of health care systems
- People with chronic diseases
- Elderly or disabled residents trying to live independently

**CORE SERVICES**
- **CARE PROVIDED**
  - See patients where they are
  - Conduct assessments
  - Provide appropriate on-scene care (i.e. wound care, medication management)
  - Identify barriers to medical, psychological, and social needs
  - Educate patients about their health issues and management
  - Identify the type of support patient needs, refer them to proper resources or networks

- **CARE COORDINATION**
  - Identify providers/organizations that can help patient with their medical and non-medical needs
  - Support patients to ensure they follow through with getting the care they need
  - Remove barriers to medical, psychological, and social needs

- **PREVENTION**
  - Outreach and disease/injury prevention (blood pressure checks, sidewalk CPR, fall prevention seminars, etc.)
  - Cover topics important to our community and help educate residents on how to handle chronic illness and prevent injuries

**LONG-TERM GOALS**
1. **Residents’ ability to manage their health is improved**
   - a) Better health literacy (know what to do and where to go)
   - b) Wider support network
   - c) More active relationship with doctor or health provider

2. **More appropriate use of 911**
   - a) Fewer non-emergency calls/repeat cases
   - b) Fewer unnecessary ER visits

3. **Cost savings**
   - a) Resources better matched to problem (MIH unit vs. fire truck; clinic vs. ER)

**MIH TEAM**
- Firefighter/Paramedic
- Nurse Practitioner

**WHERE WE ARE**
- Schools
- Libraries
- Local businesses
- Special events
- Long-term care facilities
- Independent & assisted living facilities
- Your home

**CONTACT MOBILE INTEGRATED HEALTH (MIH)**
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**SOURCES:**
1. Community Health Improvement Plan, Olathe Medical Center, 2013
2. Community Risk and Emergency Services Analysis Standard of Cover, Olathe Fire Department, 2012
3. Olathe Fire Department Year in Review, 2014

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