

UC Davis launches Health 34 initiative to provide compassionate care for the community

In September 2023, the University of California, Davis, (UC Davis) Fire Department launched an initiative called Health 34 – designed to address what it identified as a gap in treating calls that may not be considered life threatening, but that should be taken just as seriously. The [Health 34 Unit](#) responds to a range of calls – from the typical injuries around campus, like cardiac arrests and other medical issues to behavioral and mental health issues, food insecurity and housing insecurity issues.

We spoke with EMS Captain Scott Hatcher and Health 34 Provider Stormi Homdus about the program and its impact on the campus community. Here's what they had to say and why they believe Health 34 is a model that agencies around the country may want to copy.



Scott Hatcher

EMS Captain and Pre-hospital Care Coordinator - UC Davis Fire Department

What do you do as EMS captain and as pre-hospital care captain?

As the EMS Captain, I oversee our EMS division. That includes responsibility for a lot of public outreach. We are an American Heart Association (AHA) training center and provide AHA CPR classes, including hands-on CPR classes and stop the bleed classes to the community on campus. We have a public access AED program that we manage with about 120 AEDs on campus. We also have an educational division that teaches an EMT program and a paramedic program.

And we're looking to expand those opportunities to other agencies, as well. It also includes the response capabilities for the department where we go out and we respond to both non-emergent and emergent, medical aids and fires.

What kind of emergency medical calls do you usually get here on campus?

On campus we run a variety of medical calls. The campus is unique in that we are our own little city. We are a community. We have younger populations of students who get into bike accidents, sports injuries and who come with some complicated medical histories.

Then we have an older population of staff and faculty that would have all the normal calls that you would expect to run as a true emergency – including cardiac, strokes, diabetic emergencies. It... gives our responders an opportunity to stay on their game and respond to a variety of emergencies.

Tell us a little bit about the training.

We have 30 students who are employed by the department and are learning and growing in their ability to have a career in the service. So, we have this unique opportunity to inspire the next generation, to give them the skills and the tools necessary for them to advance throughout their careers.

With the student EMT side of the house, that includes monthly trainings in addition to quarterly continuing education certificates they receive. And leadership classes to make sure that when they move on from here, that they are the most prepared that they can be for their future careers.

How are the programs for firefighters and EMTS divided?

The department has two student programs. We have a student firefighter program where students are learning fire as well as EMS. And that program's been around for 100 years. The student EMT program started in 2016 and focuses on introducing students to the fire service. They may not want a career in the fire service but are looking to go into Allied Health. They come and work for us... and they receive training specific to the medical field.

Allied Health is a broad-spectrum medical program that includes nursing, nurse practitioner, physician's assistant or physician.

What are the basic communication needs for the healthcare side of things?

The communication needs for the emergency medical side of the house are similar to what we need on the fire field. We need reliable communications that allow us to get the message out as quickly as possible and make sure it is received on the other end. We use the FirstNet® network on the EMS side to make sure that we can quickly and efficiently communicate amongst our teams and with other providers responsible for patient care – including hospitals and ambulance providers.

How important is security when you're dealing with medical communications and how does FirstNet help with that?

When we're talking about medical data transmissions, security is super important. It's important we protect the patients' rights and their personal data. And it requires us to have a secure network to make sure... we're doing what's best for the patient when we transmit any data. FirstNet provides the secure connection that allows us to transmit information securely, directly to hospitals and directly to ambulance providers through their system.

What devices are you using for EMS?

Within our EMS division, we're using two devices. We are using tablets that allow us to run our ePCR system and securely transmit data to the cloud and to other providers. And we are using the Siyata devices that allow us to use LTE to communicate quickly and reliably with each other and with fire dispatch.

How has the Siyata device improved the workflow, the communication?

The Siyata is simple to use. It has an administrative portal that controls what channels and features you can use. With just a turn of a dial, we can quickly be on a talk-group, talking over an LTE network amongst each other... And that push-to-talk feature is amazing. When we need to talk to fire dispatch, it's a quick turn of a dial and we're immediately on fire dispatch and communicating, again, over a reliable LTE network directly to our dispatch center to get the resources we need.

Tell us a little bit about Health 34. How did it come to be? What does it do?

So, Health 34 is a new program on campus that's designed to reimagine compassion. It came about through the vision of Fire Chief Nathan Trauernicht. He was looking for opportunities to support and help our community prior to the emergency and post-emergency. And the Health 34 concept developed to help the community where there are resources, but they're not easily accessible.

So, what does it do? How does it work?

Health 34 has 4 providers available 24/7. They receive calls through a 7-digit number. Students can call if they're having a behavioral health emergency, having food insecurities, housing insecurities. We will take a call for anything and then triage that call and figure out how best to help that student. What we found on campus is there really is a need. And what we've found on the emergency side, is that there's usually something the student needed that if we could have provided earlier, it could have prevented the 9-1-1 call from occurring.

Is that part of the long-term vision to help you respond to real emergencies and let Health 34 handle things before they become an emergency?

Yes. Our Health 34 providers are there to respond in the non-emergent setting – pre- and post-emergency – to give the support needed. That does alleviate the burden for our 9-1-1 response crews. It helps them focus on the true emergencies. The other thing that it does is it creates a resilient community. Health 34 is providing education and assistance to help someone manage their own situation. It's giving them the tools they need when they're in crisis and aligning them with resources to prevent that emergency from ever happening.

How is it working?

It's amazing. The response we're getting from the community is outstanding. We're receiving a vast variety of calls. Some expected, some unexpected. But we've been able to help the community in unforeseen ways. The response from campus leadership has been amazing. And it's been received phenomenally by the students. Way stronger than I ever imagined.

How critical are communications? And how critical is it that these providers also have mission critical functionality?

All the devices our Health 34 providers are using are on FirstNet. We're using cell phones and tablets and we are also connected with other providers on campus. And they're able to share data with us as well. Our Health 34 providers are using the Siyata devices and FirstNet Rapid Response, which is the FirstNet mission-critical push-to-talk solution, on the device to be able to communicate directly with the resources they need. They can communicate on the Siyatas with our fire dispatch to request resources in emergent situations. And they're able to talk amongst each other in non-emergent situations and with other providers.

How do you see programs like this one shaping public safety responses?

Programs such as Health 34 are going to be the future of public service. They're going to be the future of emergency response from a holistic approach to really provide what is needed to the community. We are stronger as a community if we're able to prevent emergencies from happening. The fire service and other emergency response agencies have a great opportunity to look at how we can fit into the needs of the community. There are gaps in the system.

It's hard to get providers aligned to the services individuals need in a timely fashion. Providers like our Health 34 can provide that emergent need. They can bring someone out of crisis into a manageable state and then help them align with the resources they need to get further care. It also alleviates the burden on the system.

Scott Hatcher is the first EMS Captain with the UC-Davis Fire Department. He started with UC Davis Fire in 2005 as a firefighter, EMT, responding to calls. He did a short stint as acting operator and then was promoted to EMS Captain working in the EMS division.



Stormi Homdus

Provider for Health 34 Unit, UC Davis Fire Department

When you were working as a paramedic, did you see those gaps that the Health 34 program is trying to fill?

Absolutely. Particularly in how we treat mental health. It doesn't always feel appropriate to put someone in a police car who's having a mental health issue. And if we take them by ambulance, then they have ambulance bills or they're hospitalized in an environment that is organized but fairly chaotic... The gaps in the 9-1-1 system and EMS around mental health are extremely apparent.

Tell us a little bit about the communication needs that you have as a health provider. What do you need out there?

Our communication needs on Health 34 are always going to be with each other. So, our provider and our EMT always have a phone. We also have tablets to make sure we are always connected. As health providers in the field, we need clear communications. That's radio communications, phone communications. A decision may change when talking to the hospital. And if there's a communication failure, it affects what we can do. We need communications to be able to chart the care we provide and get reports to the hospital.

Tell us a little bit about Health 34 and what you do.

Health 34 is about compassionate people helping other people – people with mental health needs, people moving towards mental health crisis or with basic medical needs. Even if someone is not sure if they need to call 9-1-1, they can call Health 34 and we can help them activate the 9-1-1 system if necessary. We are not replacing the 9-1-1 system. We're not an emergency response, but we're here to supplement it and fill in those gaps.

What happens during any given shift?

We've had calls as simple as someone having anxiety because they lost something to thoughts of self-harm, suicidal ideation, and panic attacks. We cover a wide range of calls – including medical, where we activate the 9-1-1 system because there is a genuine emergency and they need medical attention. We've also responded when the police department wants us to make first contact to be that warm handoff from that person to the PD – so that they can get to the emergency room and be evaluated for mental health issues.

So why would PD call you?

UC Davis Police Department will call us when they have people who don't meet certain criteria to be placed on a hold. But they still need someone to be there for them. They still need counseling and continued services. Health 34 helps them connect to those services. We also do follow-ups the next day, making sure they've connected with the services they need.

What kind of services are you able to connect them to?

UC Davis has many services for students – mental health services, substance use services. We have a psychologist and we have **Aggie Compass**, which is a phenomenal program that helps with housing insecurity, food insecurity and financial insecurities, among other services. Yesterday, I was able to get someone into emergency housing. There are quite a range of services that the campus provides – as well as other clubs and communities – to which we can connect people with.

How do you think that Health 34 is going to help individuals and the community?

Health 34 is helping the community by connecting students to services they need, by being that warm handoff when they need it. Sometimes just getting to a class is hard for someone... Some services are fairly siloed and the people who use them, use them regularly. But other people don't even know about them. We're trying to break down some barriers and make sure all these services are connected to everyone.

How will this program help public safety?

When I think about the work that Health 34 has already done just in the last seven weeks, we've already helped the community and avoided some hospital transport, some 9-1-1 calls. It's just simple things. We were able to get someone into housing yesterday, get them a ride and get their belongings for them. That call could have easily escalated to a 9-1-1 call, whether it was a conflict between roommates or a mental health crisis that was happening.

What communications solutions do you use with Health 34? And why is it important that you have those?

The provider and our EMT have cell phones. We stay connected and our chief can see where we are in case there is an emergency. We also use the Siyata device. So, if we get on scene and a situation escalates – or determine it's an emergency – we're able to use the Siyata to activate the 9-1-1 system. We also use our tablets for all charting. The provider and our EMT now have tablets to do all our charting.

For Health 34, when responding to a mental health crisis it's important our tablets be connected to the internet. Most of the programs here at UC Davis are online applications – online appointments and things like that. So, we're constantly using our tablets to get students connected.

How important is that push-to-talk capability on the Siyata device?

The Siyata has been amazing. I was used to carrying around an 800 MHz radio and that's how we would communicate. But FirstNet Rapid Response has been so easy to use. Functionality-wise, it's been great. I was expecting delays, but it's super-fast and it works just as well as my 800 MHz radio.

Stormi Homdus is a provider with the UC-Davis Fire Department's Health 34 Program. She previously worked as a paramedic for a private ambulance company, responding to 9-1-1 calls on campus.

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