KATHLEEN HALLINAN, MD '96

Care Under Pressure

Through Project OAR, Kathleen Hallinan, MD '96, is training EMS providers to respond to mental health and addiction emergencies when every second matters.

When a psychiatric or substance abuse crisis call comes in, EMS providers are usually first through the door. They walk into volatile, emotionally charged situations where the balance between calming a patient and preventing tragedy can shift in seconds. For Kathleen Hallinan, MD '96, helping those providers navigate those moments has become both a professional mission and a deeply personal one.

An internal medicine physician with Guthrie Clinic in Corning, New York, Hallinan leads Project OAR (short for Olivia and Alex Roblyer EMS Training for Crisis Intervention), a federally funded initiative designed to train rural EMS providers to respond more effectively to psychiatric and substance abuse emergencies.

The effort brings together many threads of Hallinan's life: decades in primary care, volunteer service in firefighting and EMS, and years spent treating patients struggling with mental illness and addiction.

"I practice in my hometown," Hallinan says of returning to the Corning area after graduating from Upstate and completing her residency in internal medicine in Buffalo.

Her path into medicine was shaped early by local mentor Michael Cilip, MD '82, who allowed her to shadow him in Corning while she was still an undergraduate. Hallinan also volunteered at Corning Hospital, transporting patients and observing physicians at work.

"It was fascinating to see patients go from being almost on death's door to being discharged a few days later because of the care they received," she says. "I realized I wanted to be able to heal people."

That desire to help patients through complicated medical challenges eventually led Hallinan toward an area of need that was becoming increasingly visible: the growing overlap between mental illness, addiction, and gaps in access to care.

Before the Affordable Care Act expanded access to care, Hallinan volunteered through Health Ministries, where she regularly cared for patients with schizophrenia, psychosis, and bipolar disorder who often could not afford their medications.

The transformations she witnessed stayed with her.

"We were able to get donated medications, and what a difference," she says. "Once patients were taking their meds, they were back to thinking normally, hallucinations are gone, and they can function. I thought, my God, this is incredible."

Later, Hallinan began treating patients with opioid use disorder using Suboxone therapy, inspired in part by Upstate-trained internist Peter Parken, MD, HS '87.

"It's terribly rewarding to help people who want to get clean get their home back, their family back, and know their kids are safe," she says.

Her connection to EMS developed through family. After her teenage son joined the local fire department, Hallinan volunteered herself,

Kathleen Hallinan, MD '96, with her sister, Mary Hallinan, an EMT in Rochester

completing firefighter training and eventually serving as medical director for several regional basic life support services. She later became vice chair of the Southern Tier Regional EMS Medical Advisory Committee and now serves on the state EMS Medical Advisory Committee.

The idea for Project OAR took shape after Hallinan learned about federal grants through the Substance Abuse and Mental Health Services Administration (SAMHSA) aimed at helping rural EMS providers manage psychiatric and addiction-related calls. Around the same time, tragedy struck close to home.

Two close family friends, Allison and Andy Roblyer, lost both of their children within months of one another to suspected drug overdoses.

"These are wonderful people. It could have been any of our families," Hallinan says. Project OAR is named in honor of their children.

Since launching, the program has offered training in psychiatric crisis response, psychological first aid, and motivational interviewing to more than 170 EMS personnel. Providers learn everything from verbal de-escalation and trauma-informed care to recognizing when patients are at risk for cardiac arrest during stimulant-induced crises.

"A lot of the burden is borne by our EMS providers," says Halllinan. "They're put in very precarious situations. We need to support them and give them the resources they need to help these patients."

She hopes Project OAR can become a model for communities across New York. "I would love to see it done throughout the state," she says.

—Renée Gearhart Levy