

## Educational Value of Home Based Medical Care to an Academic Institution



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## Goals



- ▶ To explain how trainees are incorporated into Mount Sinai Visiting Doctors and MACT
- ▶ Value of trainees in an academic institution
  - What can you teach
  - How you can teach
  - How do you get paid to teach in the home

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## Visiting Docs: History to present time



- ▶ Started in 1995 by three medicine residents
- ▶ Primary and palliative care services for homebound
- ▶ Largest academic home-based primary care program in US
- ▶ Care for >1500 patients annually
- ▶ >6000 home visits

## Visiting Docs: Staffing



- ▶ 19 home visit physicians (10 FTE)
- ▶ 5 nurse practitioner
- ▶ 6 social workers
- ▶ 2 office-based RNs
- ▶ 8 office and administrative assistants
- ▶ Practice manager

## Mount Sinai Health System



- 7 Hospital Campuses (3,500 Beds)
- School of Medicine
- >300 Community Care Locations
- >6,600 Physicians (PCPs and Specialists)
- 6,500 Nurses
- 36,000 Employees
- 2012 ACO – 32,000 aligned Medicare beneficiaries

## Visiting Docs



- Routine and urgent visits conducted on weekdays, accompanied by trainees
- Telephone triage by RNs
- 24-hour MD availability by telephone
- Palliative and end-of-life care
- Family and caregiver support
- Close communication and coordination with community and nursing agencies

## Visiting Docs: Trainees



- ▶ Medical students: 3<sup>rd</sup> and 4<sup>th</sup> year
- ▶ Medical Residents – 5 weeks
- ▶ Geriatrics and Palliative Medicine fellows – 1 month and longitudinal
- ▶ Rheumatology fellows, cardiology fellows, neurology residents, psychiatry residents, geripsych fellows as consultants
- ▶ NP students
- ▶ Social work interns



**IF OUR  
BEDS ARE FILLED,  
IT MEANS  
WE'VE FAILED.**



## Mount Sinai's Full Page Ad

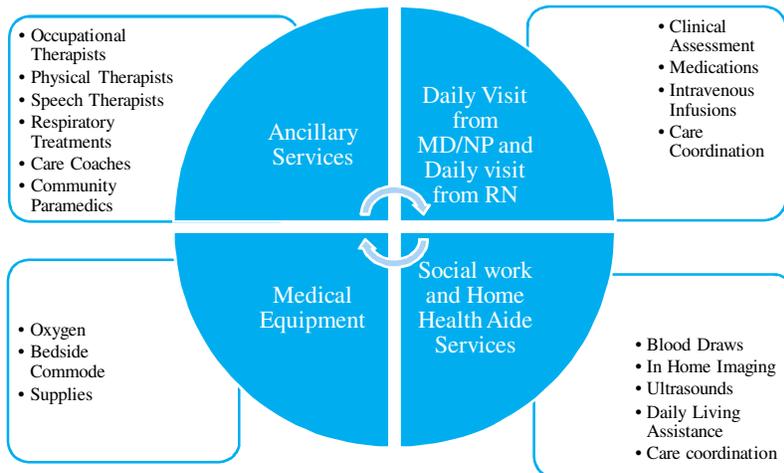
- “Mount Sinai’s number one mission is to keep people out of the hospital.”
- “Our Mobile Acute Care Team will treat people at home who would otherwise require a hospital admission for certain conditions.”

## Mobile Acute Care Team



- ▶ Hospital at Home Program at Mount Sinai
- ▶ Center for Medicare and Medicaid (CMMI) funded 9.6 Million dollar program for 3 years
- ▶ Acute patients who are determined to need inpatient admission - offered MACT as an alternative to that admission

## MACT Program Overview – In-Home Services



## MACT Trainees:



- ▶ Geriatrics Fellows
- ▶ Medicine residents - elective



## Home Based Care Education



## Seeing for yourself



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## Why Should Trainees Know about Home Care?



- ▶ Physicians are responsible for overseeing the complex network of care that occurs in the home
- ▶ Important to understand the array of services available to frail or disabled patients as they leave the hospital

## What can you teach in the home setting?

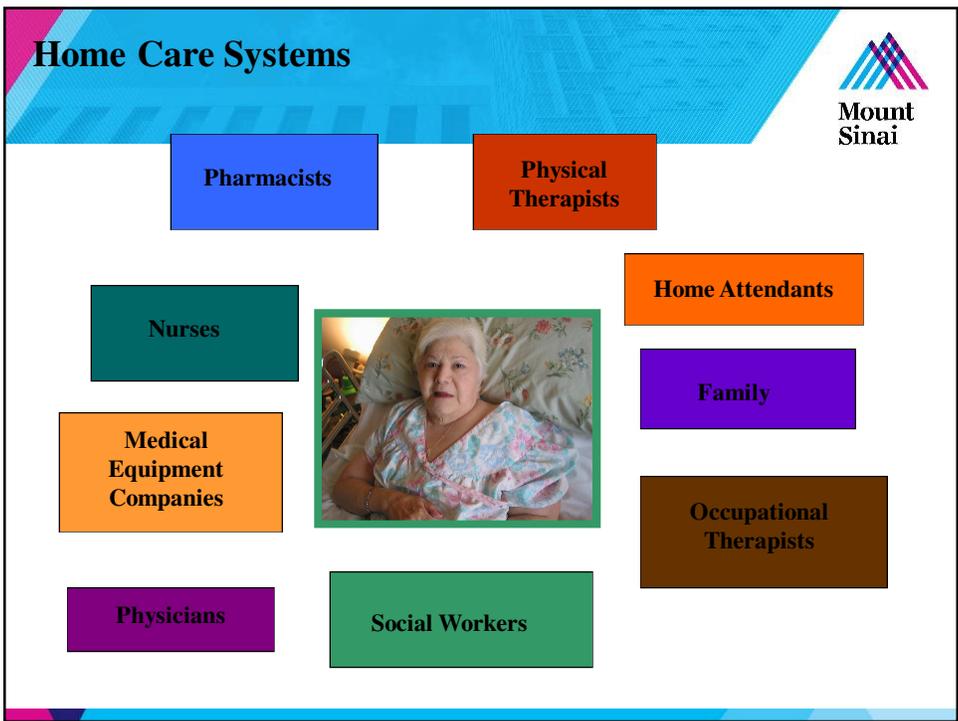


- ▶ ACGME competencies
- ▶ Geriatrics and Palliative Care principles
- ▶ Interdisciplinary learning
- ▶ All levels of learners can gain something
- ▶ Population health

## ACGME Competencies:



1. **Medical Knowledge:** Home care patients exhibit a wide variety of chronic medical conditions common to adult & geriatric populations
2. **Patient Care:** Home visits: an opportunity to teach students the importance of incorporating environmental and social factors in patient care plans, function, drug management, home safety, and wound care
3. **Systems-Based Practice:** Describe the role of visiting nurses, home health aides/personal care attendants, home PT/OT/ST



- ## ACGME Competencies:
- 
- The slide lists two ACGME competencies related to home care:
4. Practice-Based Learning: Learners can reflect how care differs in home setting than in traditional outpatient or inpatient settings; Evidence-based medical care can be provided in the home, but it may be challenging
  5. Interpersonal and Communication Skills and Professionalism :
    - Being in a patient’s home necessitates a different kind of interaction
    - Learn to communicate with caregivers
    - Effective communication with members of the multidisciplinary care team is crucial
    - Chance to observe trainees and have trainees observe you
- The Mount Sinai logo is located in the top right corner of the slide.

## Methods for engaging trainees in home care and house calls



- ▶ Target questions around chief complaint or specific follow-up issue
- ▶ Link exam findings to function
- ▶ Ask trainee to observe a specific part of history or physical and reflect afterwards

## Methods for engaging trainees in home care and house calls



- ▶ Student-student pairings
- ▶ SAM-like programs
- ▶ Resident-student pairings
- ▶ Urgent vs. follow-up visits
- ▶ Post-discharge assessments
- ▶ Nurse-student pairings

### Barriers to teaching in the home



- ▶ Safety
- ▶ Electronic Medical Records
- ▶ Transportation
- ▶ Coordination/scheduling
- ▶ Finances of home care
- ▶ Buy-in from institution (financially)

### So where do the other dollars come from?



- ▶ Grants?
- ▶ Philanthropy?
- ▶ GME Dollars?
- ▶ The Medical School Dean?
- ▶ The Hospital System?

### Workforce in House calls



- ▶ Challenging to hire all types of providers who go to the home
- ▶ Having a program where trainees can be exposed increases your pool of workforce