

HOME-CENTERED CARE CHAMPION *Position Description & Application*

Are you a **Home-Based Primary Care (HBPC) Provider** or **Practice Professional** in **Florida**?
Are you passionate about providing age-friendly, high-quality care to homebound seniors?
Do you enjoy teaching others and raising awareness about the value of home-based care?

The Florida House Call Project, administered by Home Centered Care Institute, is accepting applications for Home Centered Care Champions across the state of Florida. **Up to 20 individuals** will be selected, and these providers and practice professionals will serve as leaders and champions of home-based care and will receive specialized training designed to prepare them to spread awareness of HBPC within their communities and to lead local education of other providers, practice/operations staff, and the public, using HCCI resources, tools, and curriculum.

Position Requirements; Champions will:

- Commit to a 15-month term: **October 1, 2020 – December 31, 2021**;
- Participate at no cost to the Champion in HCCI's virtual workshop, *Essential Elements of Home-Based Primary Care™* (**12 contact hours; November 19-20, 2020**), unless previously attended.
- Participate at no cost to the Champion in HCCI's virtual workshop, *Advanced Applications of Home-Based Primary Care™* (**12 contact hours; December 3-4, 2020**), unless previously attended.
- Participate at no cost to the Champion in a specialized train-the-trainer virtual session, including PR/media training, preceptorship, leadership skills (**6-8 contact hours; Q1 2021**).
- Complete assigned online courses at no cost to the Champion based on his/her individualized learning plan and goals (**1- 5 contact hours**).
- Complete at least two of the following activities related to HBPC per quarter (Q1 2021, Q2 2021, Q3 2021, and Q4 2021), and submit quarterly reports to HCCI to describe:
 - Onsite or virtual training at professional/chapter meeting
 - In-service training for the Champion's own practice/health system or another practice/health system
 - Grand rounds at local hospital
 - Public/Patient awareness or education activity, or community group function
 - Blog or vlog posts for HCCI's website or another site relevant to the project
 - Participate in a media interview (print, radio, TV)
 - Attend and participate in Champion-led activities at the American Academy of Home Care Medicine Annual Meeting (**tentatively October 2021 in Orlando**)
 - Attend and participate in Champion-led activities at the HCCI workshop, *Essential Elements of Home-Based Primary Care™* (**December 2-3, 2021 in Orlando**)

Benefits; *Champions will:*

- Serve a key role in Florida and in the national movement to improve patients' access to high-quality home-based primary care. ***Champions will make a difference!***
- Earn up to 24 *AMA PRA Category 1 Credits™* at no charge through participation in HCCI's four-day ***Virtual Boot Camp in Home-Based Primary Care (HBPC)***, which includes Essential Elements of HBPC (November 19-20, 2020) and Advanced Applications of HBPC (December 3-4, 2020).
- Earn additional *AMA PRA Category 1 Credits™* at no charge through participation in selected HCCI online courses and the train-the-trainer session.
- Receive a modest stipend of \$500 at the conclusion of the Champion's term.
- Be granted a limited license to use HCCI curriculum, resources and tools for teaching purposes.
- Be recognized on the HCCI website, including name and link to practice website.
- If desired, HCCI will formally acknowledge the Champion's service by sending a letter to his/her professional supervisor or academic institution.

Applications are due by 11:59 pm CST, Monday, August 31, 2020 (extended deadline).

Submit the following materials to MSingleton@HCCIInstitute.org:

- 2-page Application, including signed Agreement to Participate**
- CV-** highlighting your background and experience in medical education, any specific training in medical education you have received, and organizational affiliations relevant to medical education
- Statement of Interest (max. 500 words)-** describing your current teaching activities, your personal goals related to home-based care, and how participation in **The Florida House Call Project** will benefit you and your practice

If you have questions about The Florida House Call Project, contact Melissa A. Singleton, MEd, at 630-283-9225, or MSingleton@HCCIInstitute.org.

HCCI is grateful to the Retirement Research Foundation for Aging for its philanthropic support of The Florida House Call Project.

HOME-CENTERED CARE CHAMPION -- APPLICATION

Submit with all attachments by 11:59pm CST Monday, August 31, 2020
(extended deadline) to MSingleton@HCCInstitute.org.

First Name: _____ MI: _____ Last Name: _____

Credentials: _____ Job Title/Role: _____

Practice Name: _____

Practice Address: _____

Street Address/Suite No.

_____ FL _____
City State Zip Code

Practice Phone: _____ Website: _____

Cell Phone: _____ Email: _____

Applicant Qualifications:

1. **Which of the following describes your experience in home-based primary care?**

Select one: less than one year 1-5 years 6-10 years 11-20 years 21+ years

2. **Attach your CV** – highlight your background and experience in medical education, any specific training in medical education you have received, and organizational affiliations relevant to medical education.

3. **Attach your Statement of Interest (max. 500 words)** – describe your current teaching activities, your personal goals related to home-based care, and how participation in **The Florida House Call Project** will benefit you and your practice.

Agreement to Participate:

My signature below affirms that:

- If accepted as a Home-Centered Care Champion, I agree to participate for the period of October 1, 2020 through December 31, 2021 (15 months), and to fulfill all requirements.
- If applicable, I have met with my supervisor, and we have discussed the requirements of this role and the time commitment involved.

Signature

Date

[Continue to next page to complete questions related to Practice Demographics \(required\) >>>>](#)

HOME-CENTERED CARE CHAMPION – APPLICATION (cont'd)

Practice Demographics (REQUIRED):

1. **Does your practice operate out of one site or multiple sites?** Select one: one site multiple sites
2. **What geography do you serve (e.g., counties, zip codes) and how large is your service area (square miles)?**

3. **In what year was your practice established?** _____
4. **Has your practice participated in or applied for any Alternative Payment Model(s) (e.g., Independence at Home, CPC+, Primary Care First, Seriously Ill Population, Direct Contracting)?**
 Yes No If yes, which model(s)? _____
5. **Is your practice part of an Accountable Care Organization (ACO)?** Yes No
If yes, what kind of ACO? _____
6. **Is your practice under Fee-For-Service or are you participating in a value-based payment arrangement (i.e., Medicare Advantage)?** Yes No If yes, please specify: _____
7. **Does your practice participate in MIPS?** Yes No
8. **What metrics does your practice currently track to demonstrate value of care and quality outcomes?**

9. **How does your practice define patient eligibility?** _____ (insert number or n/a) or more **chronic diseases**;
_____ (insert number or n/a) or more **years of age**; trouble with _____ (insert number or n/a) or more **ADLs/IADLs**;
specific **payer-driven criteria, disease specific**, explain: _____ other, explain: _____
10. **What is your practice's current total patient census for HBPC, including all sites?** _____
11. **Approximately what proportion of your practice's current HBPC patients live in the following types of residences?** _____ % Home/Apartment; _____ % Assisted Living Facility/Group Home;
Other (specify: _____) _____ % [Percentages must add up to 100%.]
12. **Does your practice offer 24/7 telephone coverage for urgent patient concerns?** Yes No
13. **Does your practice offer any of the following telehealth services for HBPC patients?** Select all that apply:
 video visits telephone E/M services virtual check-ins remote evaluation of photos/videos
 online digital E/M services or E-visits remote patient monitoring no telehealth services
14. **Describe what services your practice provides?** Select all that apply:
 chronic care management transitional care management longitudinal primary care
 advance care planning annual wellness visits wound care
 mental health palliative care other: specify below
 procedures (e.g., trach tube replacement, g-tube replacement, joint injections) _____
15. **What is the total full-time equivalent (FTE) for each type of professional currently employed by your practice?**
(Write in with up to two decimals, e.g. "1.25") Physician(s) _____; Nurse Practitioner(s) _____;
Physician Assistant(s) _____; RN(s) _____; LPN(s) _____; Medical Assistant(s): office-based only _____;
Medical Assistant(s): travel with provider _____; Social Worker(s) _____; Psychologist(s) _____;
Pharmacist(s) _____; Non-clinical Front Office Staff (e.g., Receptionist) _____; Practice Manager(s) _____;
Coder(s)/Biller(s) _____; Other _____ (specify: _____)
16. **On average, how many home visits are made each day by all providers in your practice?** _____
17. **If you are a provider, on average, how many home visits do you make each day?** _____

Thank you! Be sure to submit with all attachments by 11:59pm CST, Monday, August 31, 2020 (extended deadline) to MSingleton@HCCIInstitute.org.