

# MEDICAL HOME CLERKSHIP Broadlawns Medical Center

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#### **GENERAL DESCRIPTION**

#### **Elective Rotation**

This fourth-year student elective rotation is a four week experience in a medical home clerkship and is intended to be a structured clinical and coordinated care experience under direct supervision. This rotation is a time to gain a basic understanding of the various aspects of a medical home as it pertains to enhanced patient care in the primary care setting.

A grade for the rotation will not be given, or posted to the student transcript until all post rotation paperwork and requirements are completed and received in the DMU Office of Clinical Affairs. No post-rotation written examination is required for this rotation.

## **Purpose**

In 1991, the Institute of Medicine identified the poor quality of care in the current healthcare system and called for reform. The Medical Home has become the new model of care to improve patient outcomes and decrease wasteful spending. The Medical Home is comprised of many innovative components from improving patient access, chronic disease registries, coordinated care, and electronic health records. There is no formal training of this new model in the current medical school training. This rotation will provide a hands-on introduction to the Medical Home and what is shaping up to be the future of primary care. This will provide students with the opportunity to learn about the Medical Home and its various aspects prior to choosing a specialty and entering post-graduate training.

**COURSE OBJECTIVES** 

**General Overview** 

We recognize that four weeks is an insufficient time to cover a comprehensive list of objectives; however, by the end of this rotation the student should be able to:

- Discuss the current landscape of healthcare reform regarding the Medical Home and the future direction of primary care.
- Identify and discuss the various criteria of a Medical Home and how they pertain to improved patient care.

#### Access

 Discuss clinic policies and practices and how to prevent ER visits and hospitalizations through improved patient access.

### Chronic Disease Management

- Discuss the main capabilities of a chronic disease registry and how they pertain to improved outcomes and population medicine.
- Generate four different types of reports from a chronic disease registry.
- Identify the current standard of care (benchmarks, testing, and screening) for the following diseases: Diabetes, Asthma, COPD, Depression, Chronic Pain.
- Apply knowledge of the current standard of care for various chronic diseases through phone visits, pre-visit chart reviews, and face to face visits under direct supervision.

#### Preventative Medicine

- Identify the current standard of care (screening, immunizations, and risk assessments) for general health maintenance and preventative medicine.
- Apply knowledge of the current standard of care for preventative medicine through phone visits, pre-visit chart reviews, and face to face visits under direct supervision.

### Referral Tracking

- Discuss the importance of referral tracking as it pertains to the Medical Home
- Maintain a referral tracker tickler file.

#### Electronic Health Record

 Identify the potential capabilities of an Electronic Health Record (EHR) as it pertains to a Medical Home.

### <u>Implementation</u>

Course objectives are to be met in the Broadlawns Family Health Center, under supervision. Basic objectives must be covered during the rotation to assure adequate student preparation for board examinations, post-doctoral training and independent patient care. The use of diverse methods

appropriate to the clinical site will be utilized, but patient-centered teaching will be the main focus.

Didactic methods to achieve required objectives include:

- Reading assignments
- Medical Home Overview Orientation
- Student assigned lectures
- Computer-assisted programs

#### Clinical Processes methods include:

- Clinical Processes Overview
- Tracking of same day visits, cancellations, and no shows
- Managing a referral tracking system

# Patient management methods include:

- Chronic Disease Registry Overview
- Use of the four types of Chronic Disease Registry reports: Point of care patient summary report, Provider progress report, Exception report, Stratified population report
- Pre-visit chart biopsies with a weekly emphasis on a different chronic disease and its standard of care recommendations
- Participate in clinic visits pertaining to the chronic disease of the week and utilize the patient summary report at the point of care to educate the patient.
- Generate a provider progress report for resident physicians and faculty and discuss benchmarks for quality care within a population.
- Generate a stratified population report to identify a specific population for targeted improvement.
- Generate an Exception report to identify populations due for services and contact these patients for scheduling or education.

# **Goals and AOA Competiencies**

- Patient Care- Students should be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Students should be expected to:
  - o Educate patients regarding their health care
  - o Participate in the care of patients in the clinical setting
- **Medical Knowledge-** Students must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological, and social-behavioral sciences, as well as the application of this knowledge to patient care. Students are expected to:
  - o Demonstrate knowledge of the basic science principles necessary to understand the clinical aspects of disease.

- o Understand and explain the pathophysiology, clinical manifestations, and treatment options for the common diseases seen by medical home providers.
- Practice-Based Learning and Improvement-Students must demonstrate the ability to investigate and evaluate the care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning. Students are expected to develop skills and habits to be able to:
  - o Identify and perform appropriate learning activities
  - Locate, appraise and assimilate evidence from scientific studies related to their patients' health problems
- **Systems Based Practice-** Students must demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability fot call effectively on other resources in the system to provide optimal health care. Students are expected to:
  - Work effectively in various health care delivery settings and systems
  - o Coordinate patient care within the health care system
- **Professionalism-** Students must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles. Students are expected to demonstrate:
  - o Compassion, integrity, and respect for others
  - Sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation
- Interpersonal and Communication Skills- Students must demonstrate interpersonal and communication skills that result in the effective exchange of information and teaming with patients, their families, and professional associates. Students are expected to:
  - Communicate effectively with patients and families across a broad range of socioeconomic and cultural backgrounds
  - o Communicate effectively with physicians, other health care professionals, and health related agencies
- Osteopathic Practice and Principles Students must demonstrate the skills and knowledge to know what osteopathic principles and techniques are, and are not appropriate. Students are expected to:
  - o Perform an appropriate structural evaluation.
  - o Outline a plan of treatment utilizing the appropriate modality (HVLA, muscle energy, facilitated release, Still techniques, etc).
  - o Carry out the treatment under supervision.

Evaluation of the student must be completed within one week of the completion of the rotation, and can be done on-line via E\*Value. On the last day of service, the supervising physician should review the student's performance with the student. It is also highly recommended that the student ask for, and receive, ongoing performance feedback throughout the rotation; although most of the time this will be verbal and not in written form.

# **REQUIRED READING**

# **Required Assigned Articles:**

<u>Chronic Disease Registries: A Product Review;</u> Prepared by NAS Consulting Services, May 2004.

<u>Crossing the Quality Chasm: A New Health System for the 21<sup>st</sup> Century</u>, Institute of Medicine Consensus Report, Mar 2001.

<u>The Future of Family Medicine: A Collaborative Project of the Family Medicine</u> <u>Community</u>; Future of Family Medicine Project Leadership Committee; Annals of Family Medicine, 2:S3-S32, 2004

<u>Chronic Conditions: Making the Case for Ongoing Care</u>; Anderson, G., et al., Partnership for Solutions, Johns Hopkins University, Dec 2002

<u>Creating a Lean Practice</u>; Endsley, S., et al., Family Practice Management, 13(4):34-38 Apr 2006,

Quality Improvement: First Steps; Coleman, M. and Endsley, S., Family Practice Management, Mar 1999.

#### ATTENDANCE POLICY

Each student is expected to be in attendance and participate as per the COM Clinical Rules and Regulations.

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