

# IOWA LUTHERAN HOSPITAL FAMILY MEDICINE RESIDENCY PROGRAM

## **Policy: Home Visits**

Our goal is for all residents to make at least one home visit per year. One home visit in the R1 year is to be an introductory visit accompanied by a faculty member. One home visit per year is required during the R2 and R3 years. For the home visit a resident should choose a clinic patient who would benefit from a home visit from his/her panel of patients. At least one patient is to be an older adult.

### **I. Purpose**

- A. To demonstrate the informational value of a home visit by learning about the cultural, social, and environmental factors in the patient's home.
- B. To develop and maintain observational skills in assessing risk factors that could result in trauma, nutritional deficits, and neglect/abuse.

### **II. Criteria**

Candidate for home visits should meet one or more of the following criteria:

- 1. Frequent hospital admission or recent discharge.
- 2. Mobility impairments.
- 3. Terminally ill (whether in Hospice or not).
- 4. Recently bereaved.
- 5. Need for a patient/family meeting to make an important decision.
- 6. History of accidents.
- 7. Frequently failing appointments.
- 8. Severe chronic illnesses.
- 9. Newborn identified at increased risk.

Candidates should meet ALL of the following criteria:

- 1. Be an established patient at the Family Medicine at East Des Moines.
- 2. Live in a geographically feasible area that is felt to be safe.
- 3. Have no discernable need for ER services
- 4. Be able to schedule appointment in advance.
- 5. Have a phone.

### **III. Procedure**

- A. The resident chooses a patient who would benefit from a home visit from his/her panel of patients.

- B. The resident pre-staffs the visit with the faculty advisor so that goals of the visit are determined and that appropriate resources are available. This may include scheduling a nurse or faculty to accompany the resident if assistance is necessary.
- C. The resident schedules the visit with the patient and obtains directions. The visit typically will occur during clinic time and the resident is responsible for having the clinic schedule blocked.
- D. Equipment likely to be needed in the visit will be taken from the clinic in the home visit bag stored in the staffing office.
- E. The visit is staffed with the Family Medicine Center faculty the day it is completed or the next morning if done late in the day. Appropriate follow up is planned.
- F. A fee can be submitted only if a faculty staff is present.
- G. The visit is documented in the electronic record and is labeled as a home visit.
- H. A home visit documentation form is completed and given to the residency office staff.