

**IOWA LUTHERAN HOSPITAL TRACK-DES MOINES
UNITYPOINT HEALTH-CENTRAL IOWA FAMILY MEDICINE RESIDENCY**

Policy: Home Visits

Our goal is for all residents to make at least two home visit during the duration of training. Most often, these visits are completed during the R2 and/or R3 years. For the home visit a resident should choose a clinic patient known to the resident and would benefit from a home visit. 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

Candidates 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. Needing 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
- 10. Polypharmacy with more than 8 medications

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 or from clinic patients previously seen
- B. The resident pre-staffs the visit with the faculty advisor or a staffing physician 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 contacting program leadership to assist in blocking time for scheduling the patient. 1-2 hours for appointment is allowed.
 - D. Equipment likely to be needed in the visit will be taken from the clinic in the home visit bag stored in the resident lounge.
 - 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.

Reviewed 6/22