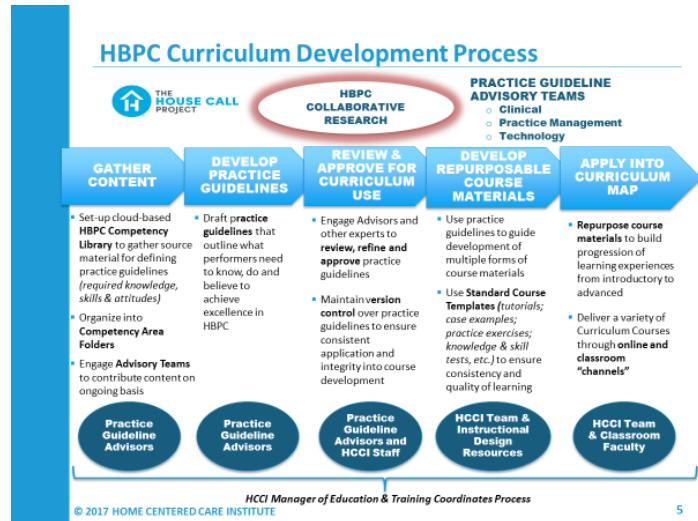


Training the Home-Based Primary Care Provider

One of the most important elements of our five-year strategic plan is the development of a curriculum for home-based primary care (HBPC) providers. When a patient walks into an emergency room he or she assumes that the ER doctors and nurses have all been trained according to established ER protocol. Although quality and levels of care obviously differ from place-to-place and hospital-to-hospital, a patient rightly believes that anyone working in an ER has at some point in their training been educated in the best practices of emergency care.

For all HBPC providers who make regular or occasional house calls today, there is no established curriculum or certification to ensure that they are trained in the best practices of home-based primary care. Establishing a standard curriculum for this work is critical to establishing not only patients' trust in a home-based system, but also the trust of doctors, nurses, and other care providers. No one wants to start a new job feeling that he or she has been thrown into a situation with no training, especially a job as important as this. What's more, no hospital administrator or other funder is interested in providing financial support to a system without adequate assurance that care providers have been responsibly trained.

For HCCI the first step in developing the curriculum is to engage advisory teams who can contribute to a library of source material for defining guidelines. These advisory teams consist of clinical practitioners and those familiar with practice management; advisors will assist other experts in defining, reviewing, and refining practice guidelines.



We will then use these practice guidelines to guide the development of course materials in multiple formats and at multiple levels. Although it is important to us that doctors, nurses, and students be able to access our curriculum online or in more traditional classroom or workshop settings, it is equally important that the consistency and quality of learning remain the same across formats. We will be able to repurpose our course materials to build a progression of learning experiences from introductory to advanced. We anticipate multiple levels of training based on increasing levels of competency.

The foundation level will consist of classes explaining the importance of home-based primary care as well as details of sound practices in the care, and the economics of the system. Each subsequent level would delve more deeply into these practices, as well as the economic, social, and medical realities of home-based primary care.

Obviously, the entire curriculum won't be developed in a day. Our goals for 2017 are:

1. Establish the learning management system for delivering and tracking classroom and online training.
2. Design standard templates for basic education materials.
3. Design, test, and release Level 1 HBPC training center classroom courses.

Look for updates on our curriculum in future editions of *HCCInsights*, on our website and in social media.