

Hospital AT Home USERS GROUP™

Building Your Dream Team *Strategies for Staffing Your Hospital at Home Program*

David Levine | Brigham & Women's Hospital

Rob Boxer | Brigham & Women's Hospital



Webinar
February 2022



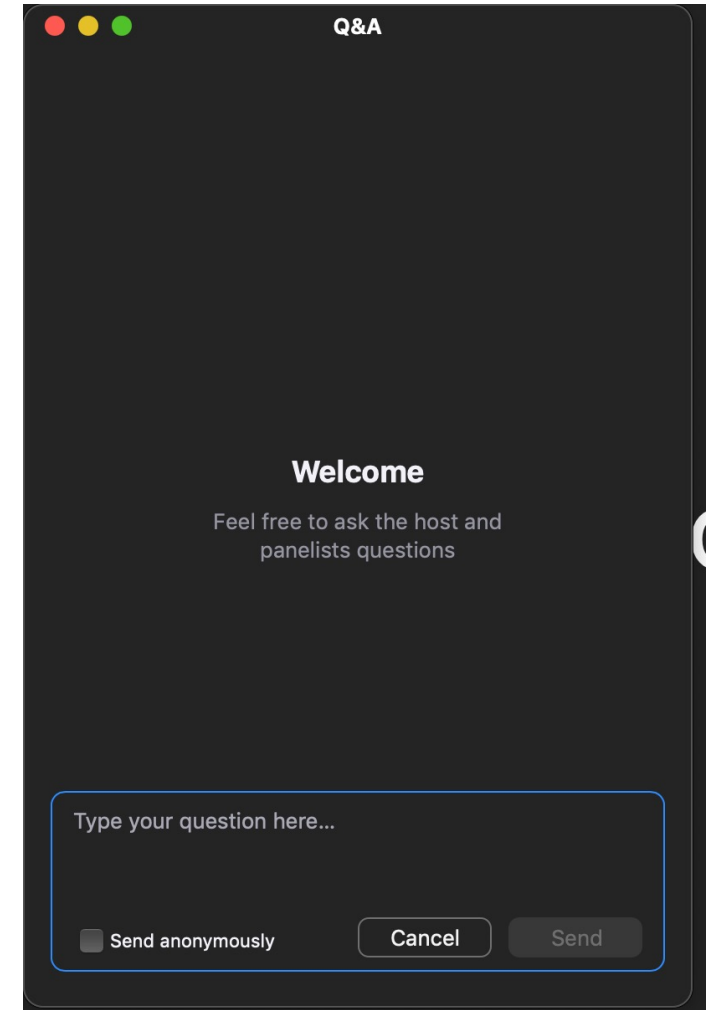
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ZOOM Webinar Housekeeping

- Please submit your questions via the Q&A option.
- Due to the large audience for today's webinar, everyone has been placed on mute.
- If you have any technical issues, please contact Gabrielle Schiller (gabrielle.schiller@mssm.edu) or send her a message via the Zoom chat feature.





Bruce Leff, MD
Professor of Medicine
Johns Hopkins University School of Medicine

Hospital AT Home USERS GROUP™

Web: hahusersgroup.org

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The HaH Users Group Webinar Series

- The Hospital At Home Model and the CMS Acute Hospital Care At Home Waiver
- Building Support for Your Hospital at Home Program: Issues in Strategic Engagement
- Who's In, Who's Out? Deciding Which Patients Are Right for Your Hospital at Home Program
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- Finding Your People: Issues in Patient Identification, Recruitment and Referral
- Looking Ahead: Hospital At Home Beyond the Public Health Emergency
- By the Numbers: Financial Models, Value Propositions, and Projections for the Next Generation of Hospital at Home Programs
- Hospital at Home for Cancer Care: Current Innovations, Opportunities, and Challenges

See [Events](#) or the Technical Assistance Center at HaHUsersGroup.org

Today's Webinar

Building Your Dream Team

**Strategies for Staffing Your Hospital at Home
Program**



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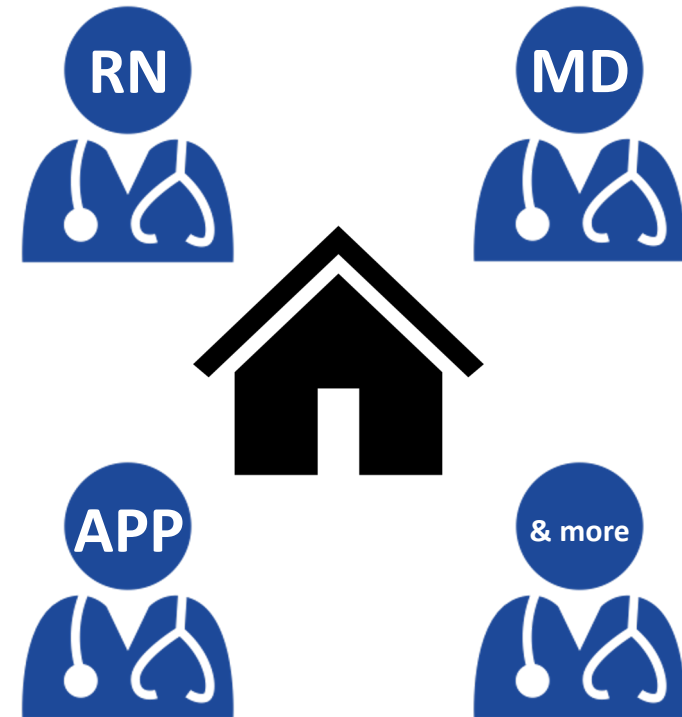
Who's on the team?

The People

Part of a Large Team



- Supplies
- Laboratory
- Biomed
- Financial services
- Quality & safety
- Patient/Family relations
- Risk
- Billing*
- Compliance*
- Care coordination*
- And more!



*New roles since Acute Hospital Care at Home Waiver

Learn more at: HaHUsersGroup.org

Home Hospital Roles

Clinical

- Nurse*
- Paramedic
- Physician*
- APP
- Pharmacist
- PT, OT, SLP
- Social worker
- Community health worker
- Phlebotomist
- Care coordinator

Operational

- Program associate*
- Dispatch
- Transporter
- Handy(wo)man
- Companion

Administrative

- Practice administrator
- Executive sponsors

*Core roles

Nurse & Paramedic

Duties	Competencies	Considerations
<ul style="list-style-type: none">• Medication administration• Line access and maintenance• Patient education• Biometric monitoring review and response• Care coordination	<ul style="list-style-type: none">• IV placement• Infusion• Phlebotomy• 12-lead ECG• Urinary catheter placement• Wound care• Documentation	<ul style="list-style-type: none">• RN: Home care vs acute care background• EMTP: Needs specialized MIH training

Licensed Independent Practitioner

Duties	Competencies	Considerations
<ul style="list-style-type: none">• Patient selection• Evaluation and management• Patient education	<ul style="list-style-type: none">• Hospital medicine• Home hospital medicine• Remote medicine• POCUS• Procedures• Documentation	<ul style="list-style-type: none">• Hospital vs primary care background

Program Associate/Coordinator/Specialist

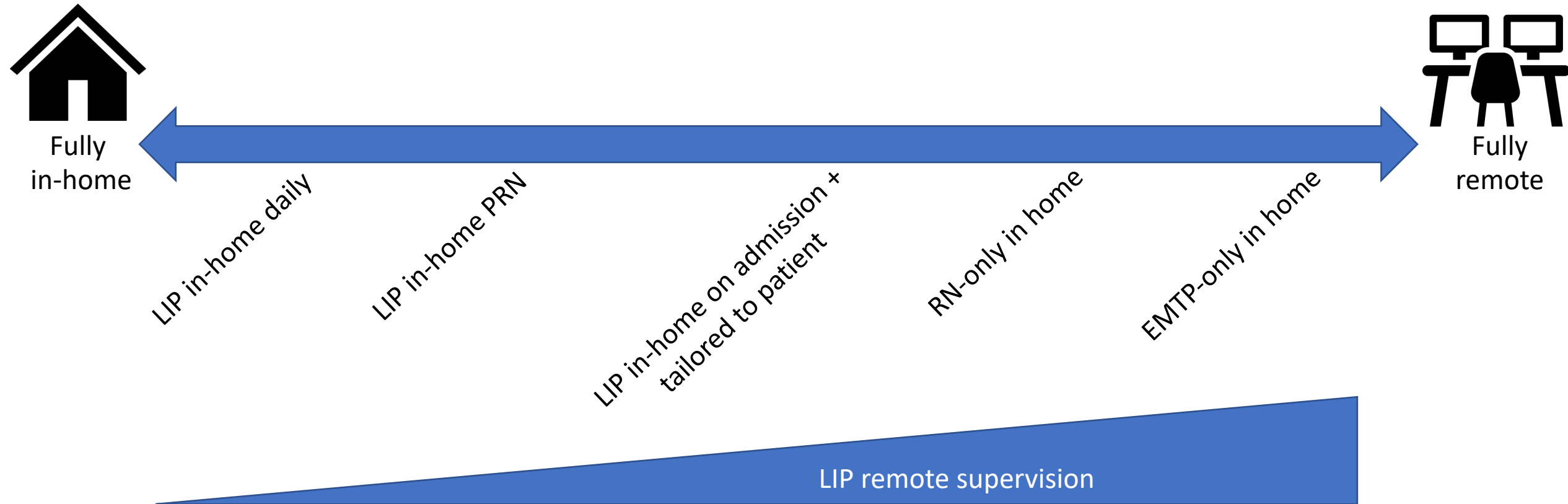
Duties	Competencies	Considerations
<ul style="list-style-type: none">• Patient selection• Supply chain• Day-to-day logistics• Maintenance	<ul style="list-style-type: none">• Organized• Follow algorithms• Patient/family communication	<ul style="list-style-type: none">• Career vs stepping stone to a career



How many folks you need

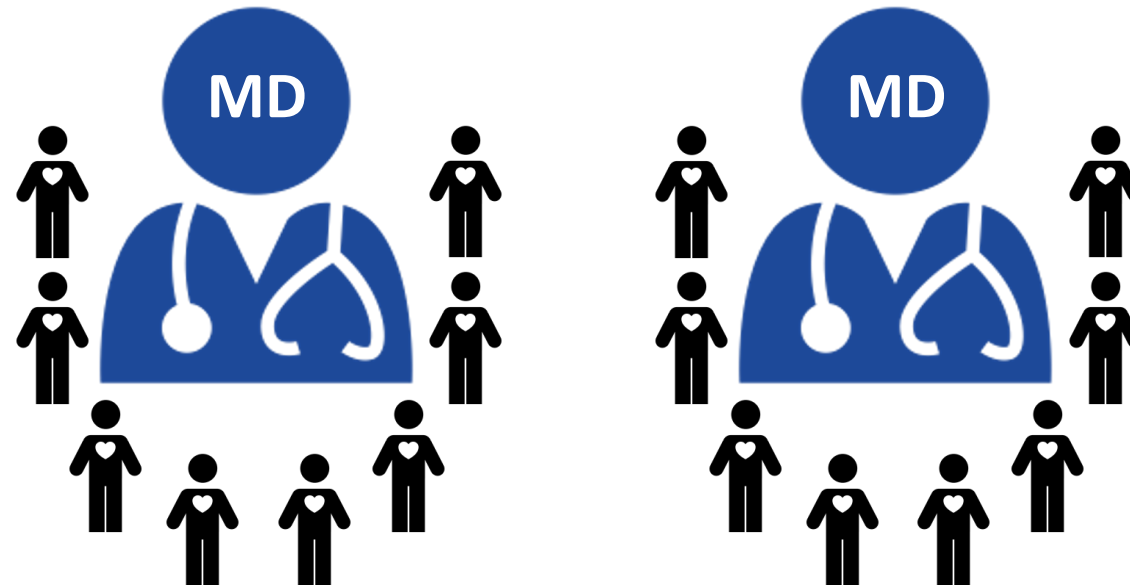
Staffing Models

Staffing Model Spectrum



Direct Care MD

	Per MD	HH total
Avg Census	6	12
Max Census	8	16
Avg Encounters per day	8 - 9	16-18



Assumptions:

- MDs identify, admit, round, and discharge
- No overnight admissions

MD Phenotype:

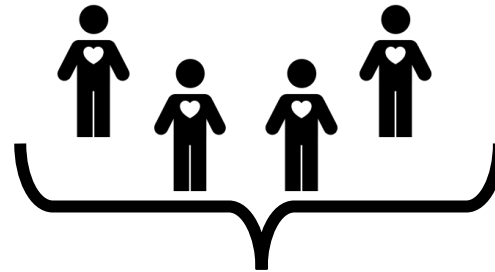
- Acutely ill
- Complex

Mixed MD+APP



APP patients:

- Admission: in-home
- Subsequent: in-home +/- remote



oversight



MD patients:

- Admission: in-home
- Subsequent: in-home +/- remote

APP Phenotype:

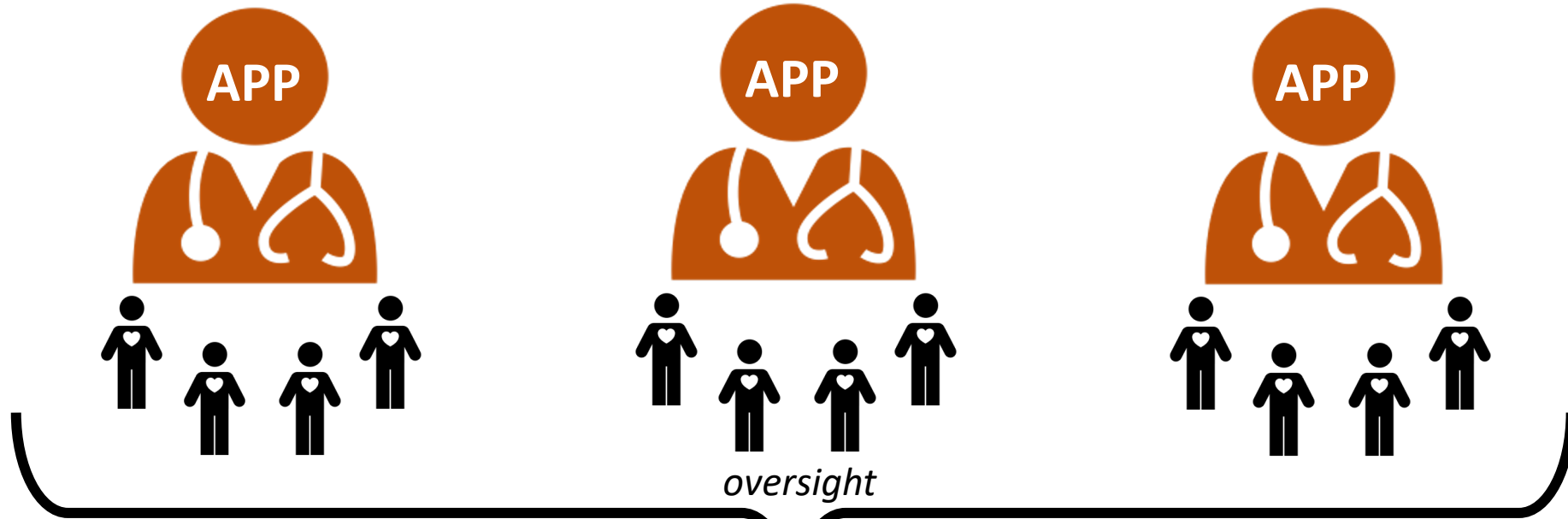
- Acutely ill
- Straightforward

MD Phenotype:

- Acutely ill
- Complex

	Per MD	Per PA	HH total
Avg Census	5	3	8
Max Census	6	4	10
Avg Encounters per day	8 - 10	3-5	11-15

Mixed MD+3APP



APP patients:

- Admission: in-home
- Subsequent: in-home +/- remote

MD patients:

- Admission: +/- in-home
- Subsequent: guidance +/- remote
- Less, if any, direct care

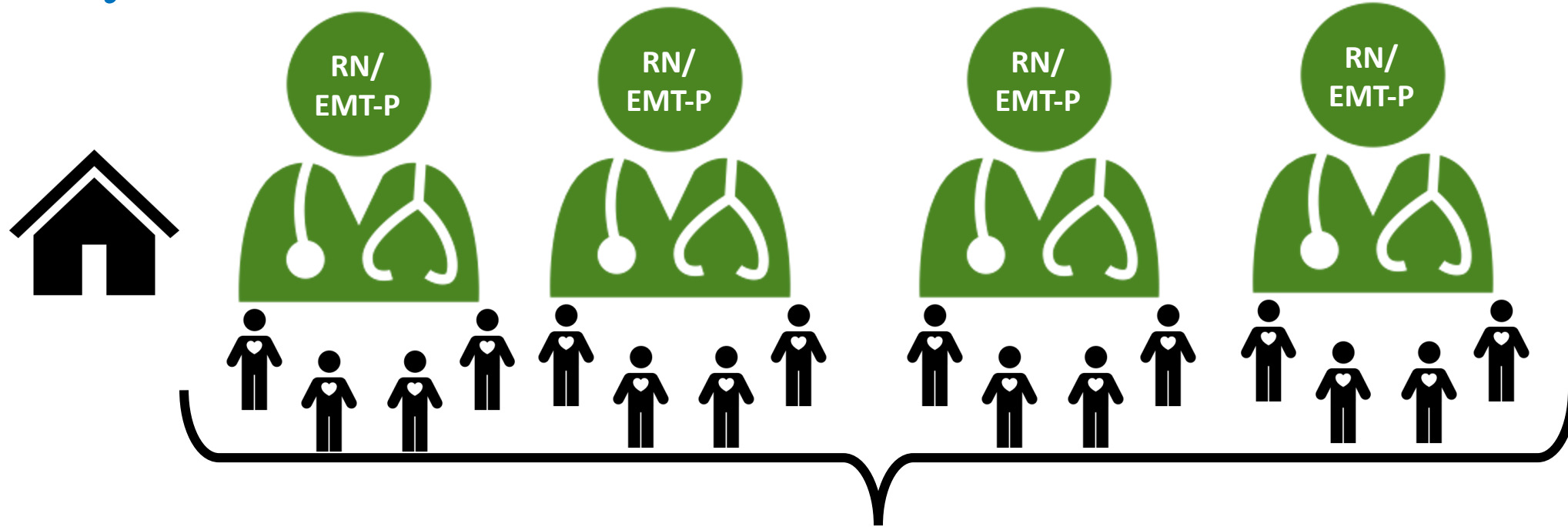
APP Phenotype:

- Acutely ill
- May reduce complexity

MD Implications:

- May allow for other clinical roles
- Greater bandwidth for medical direction, patient identification

Fully Remote MD/APP



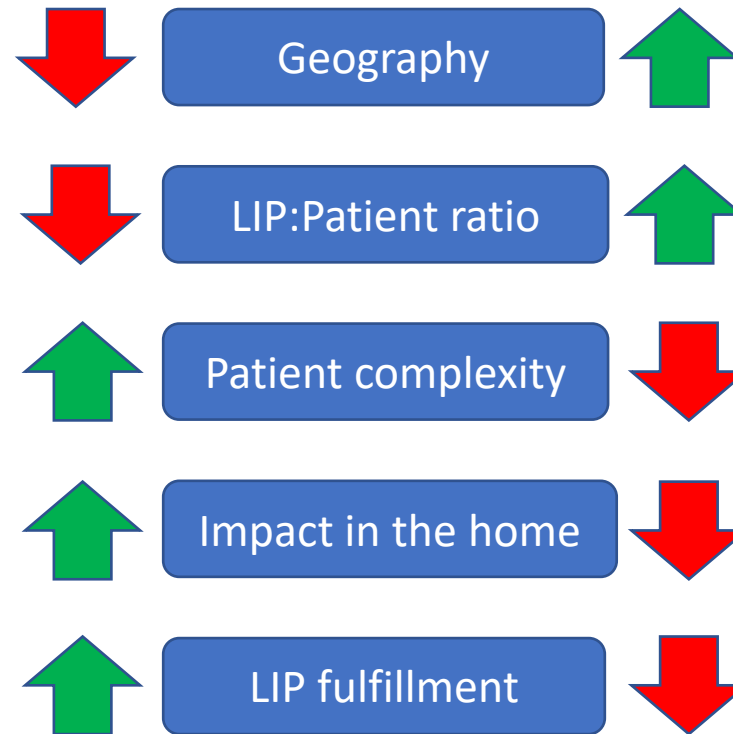
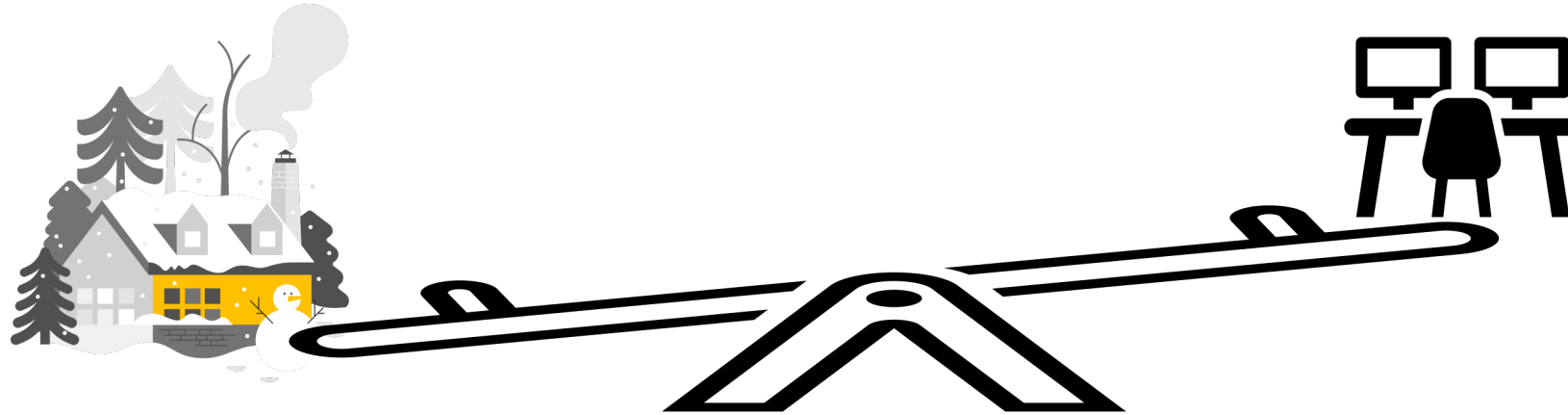
APP MD

Phenotype:

- Reduced acuity
- Reduced complexity

The diagram shows a person sitting at a desk with two computer monitors, representing the remote care team. To the right, two icons represent the APP (Advanced Practice Provider) and MD (Medical Doctor). The APP icon is orange and the MD icon is blue. To the right of these icons, the text "Phenotype:" is followed by a list of two bullet points: "Reduced acuity" and "Reduced complexity".

In-Home vs. Remote Clinical Direction

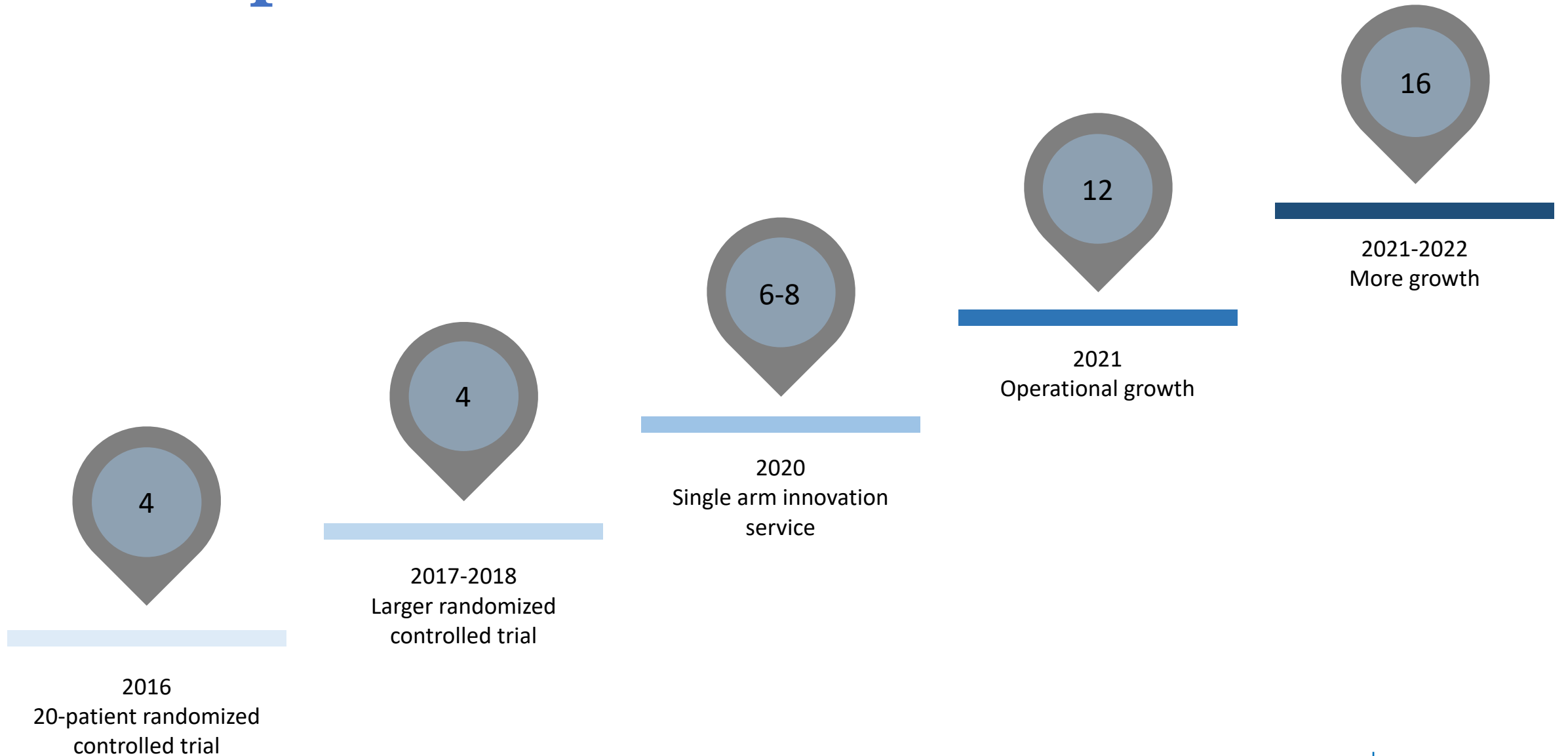




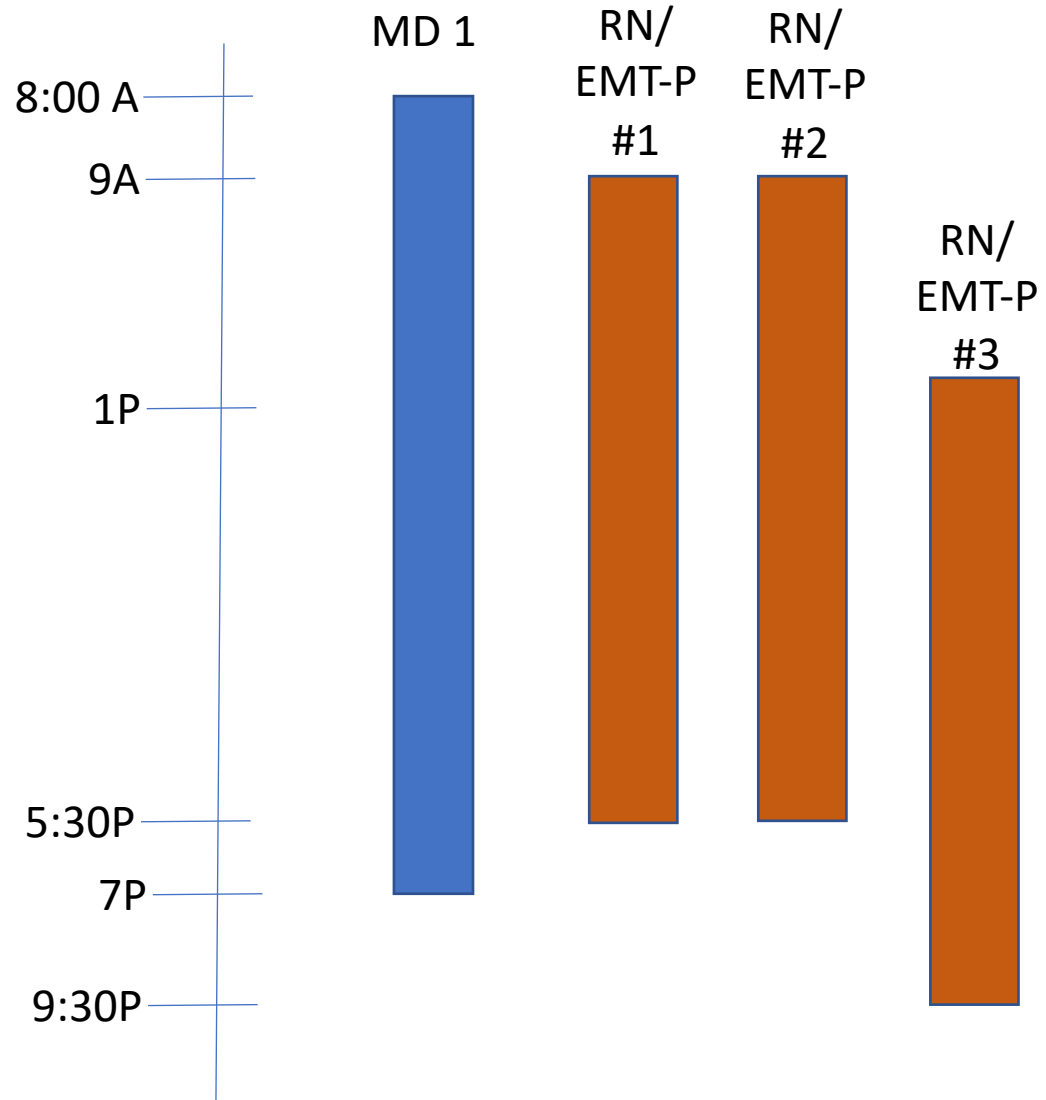
When everyone works

Daily Schedule

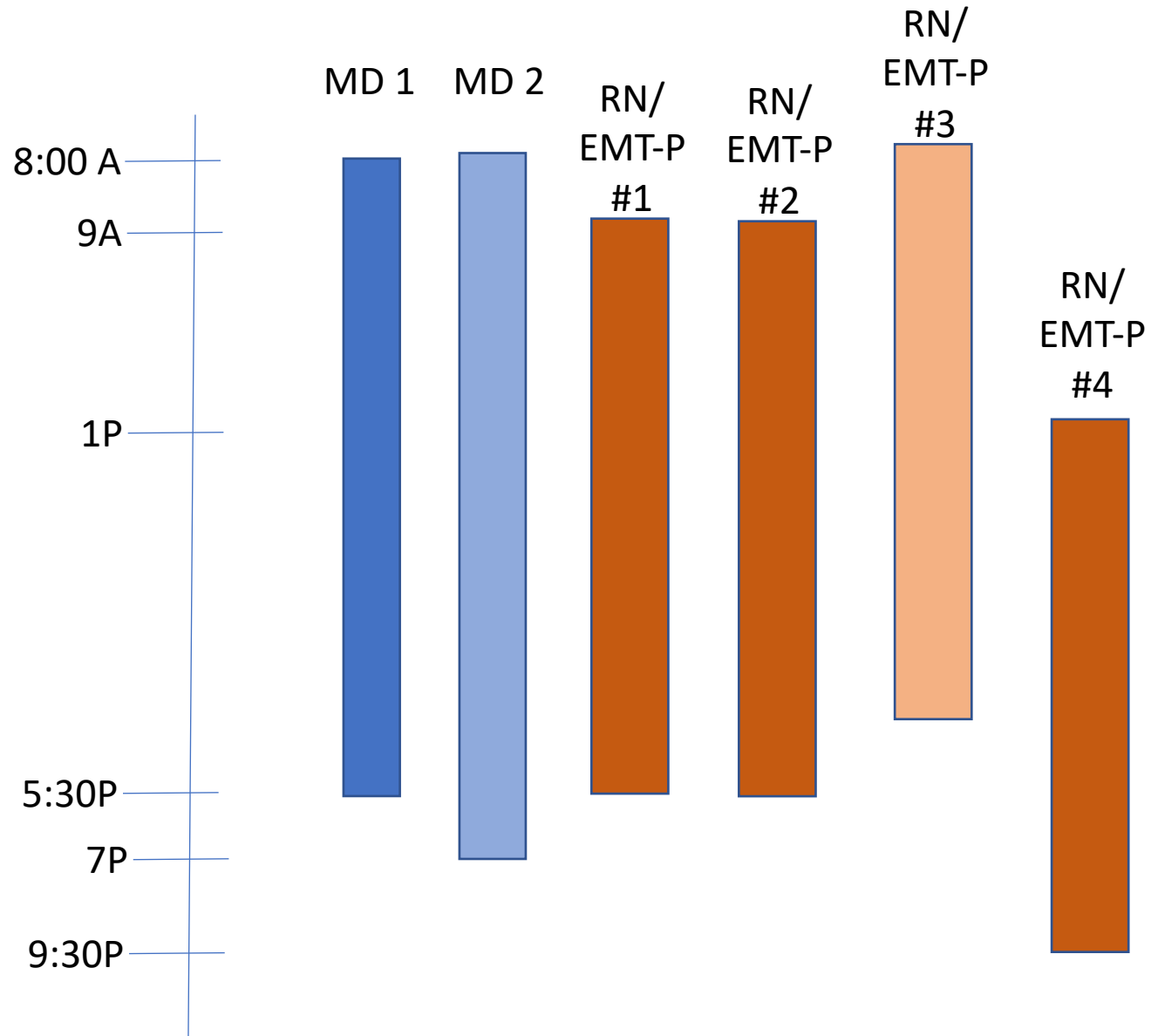
Once Upon a Time



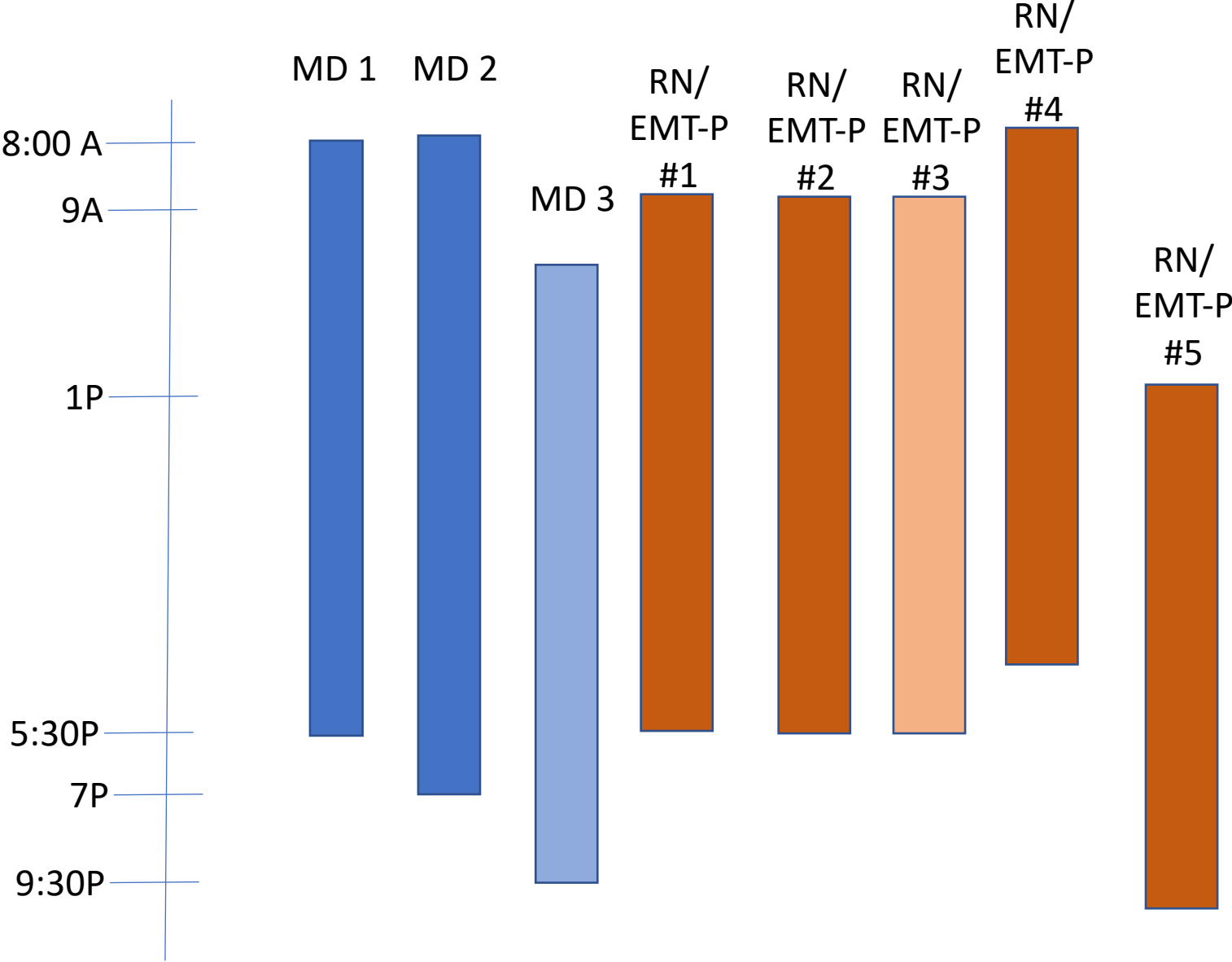
Daily Schedule for Census 6-8



Daily Schedule for Census 12



Daily Schedule for Census 16

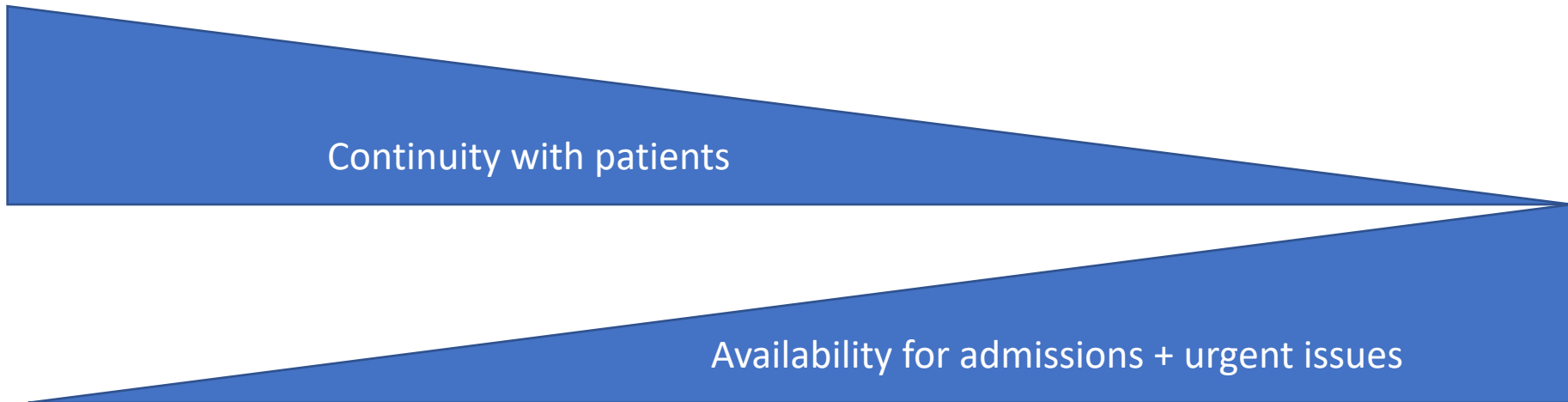


RN/Paramedic Staffing

8-hr shifts

10-hr shifts

12-hr shifts

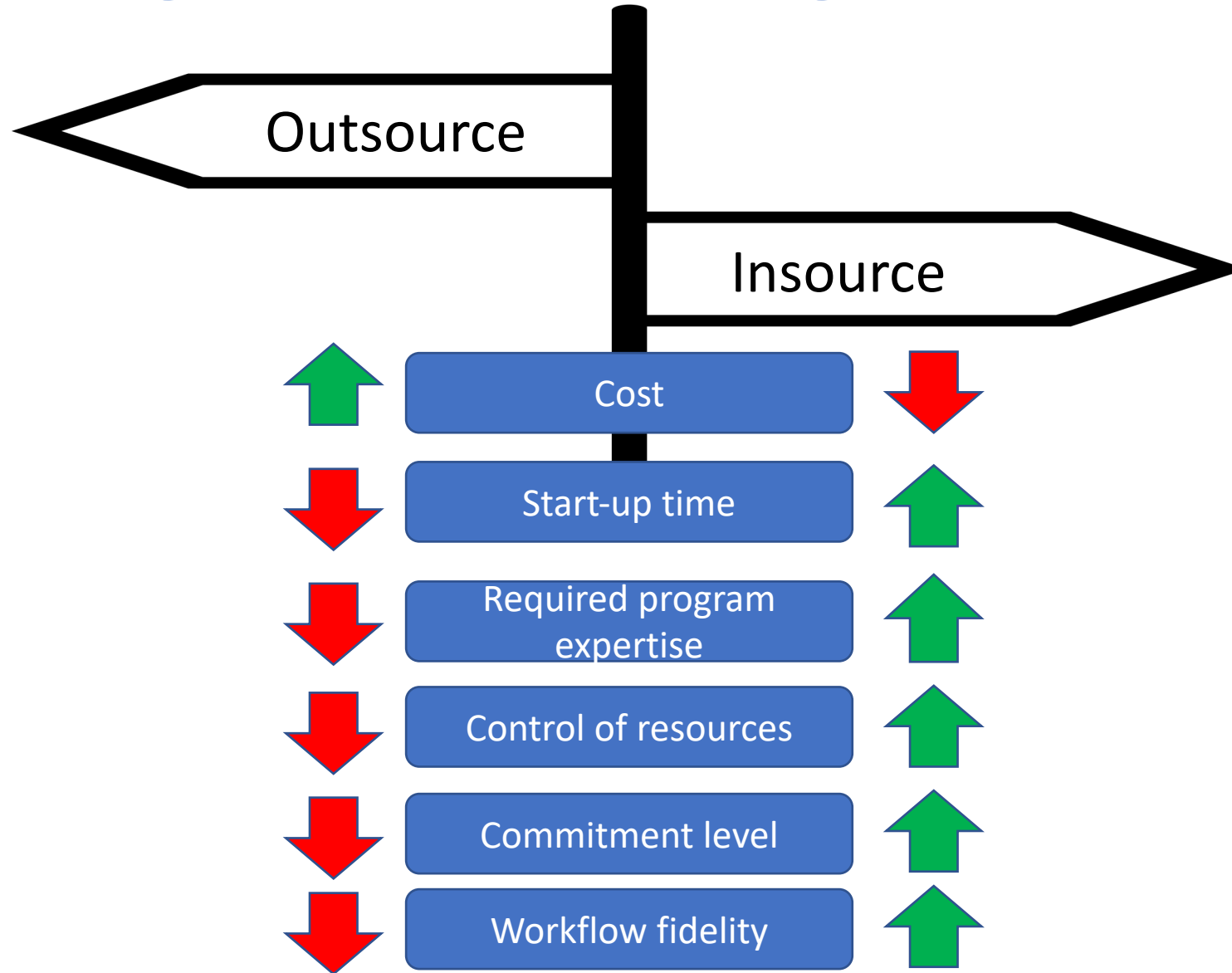




How to pick the best

Hiring Considerations

Outsourcing vs. Insourcing

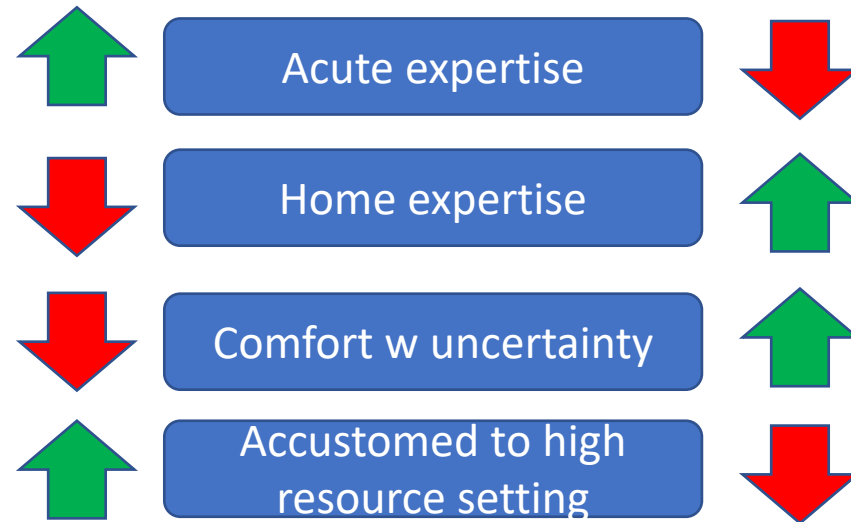


Nurse +/- Paramedic

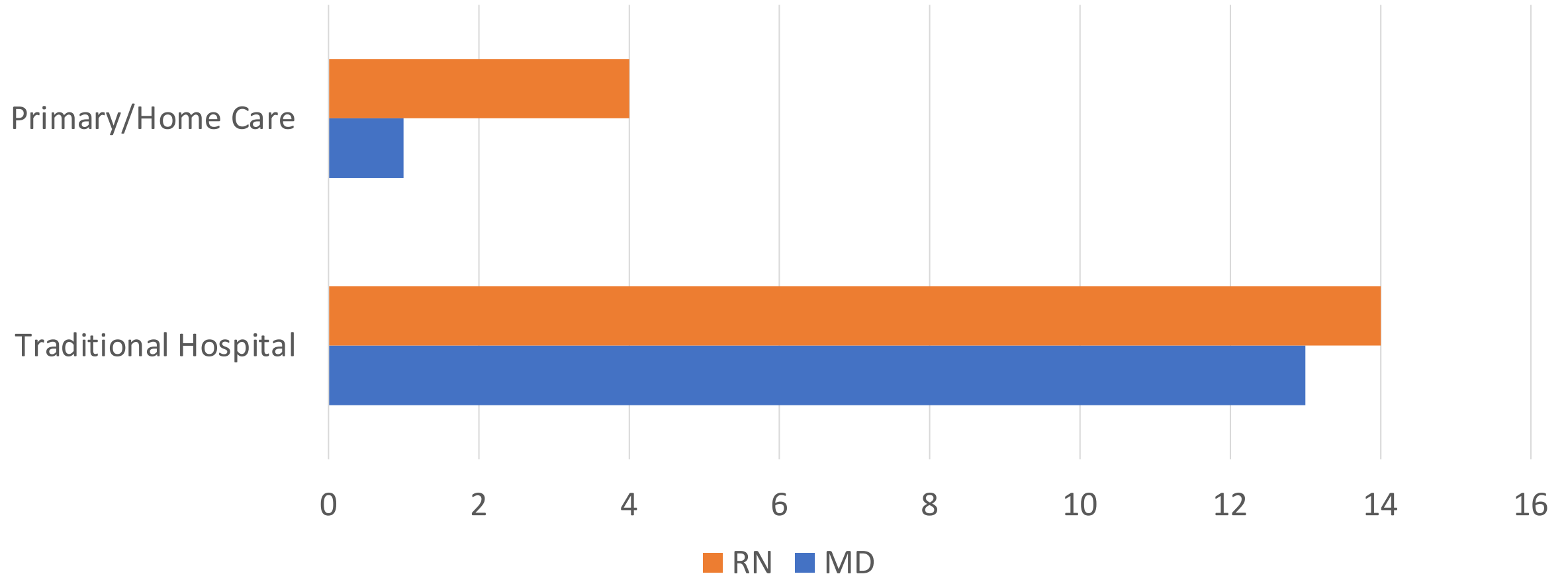


↑	Continuity	↓
↓	Procedural experience	↑
↑	Available pool	↓
↓	Regulatory guidance	↑
↑	Plan of care expertise	↓
↑	Cost	↓

Acute vs. Home Experience



Our Staff Background

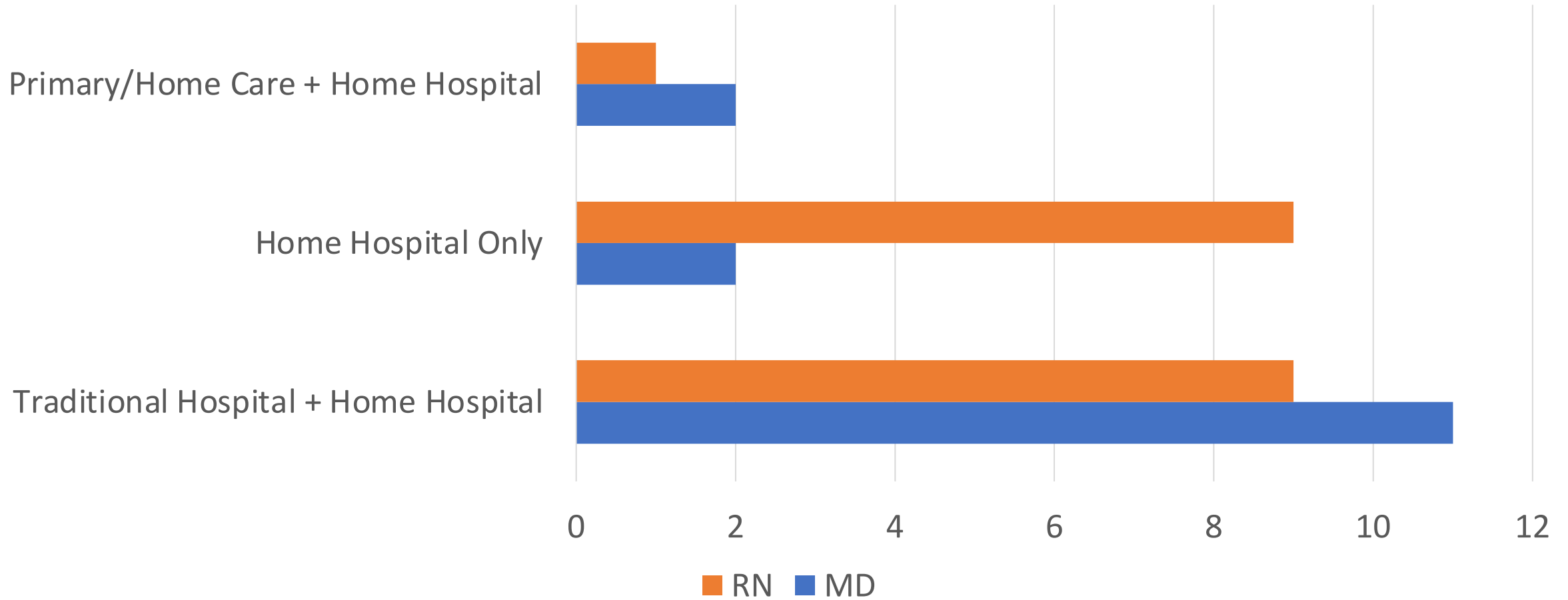


Multi-role vs Home-Hospital Only



↑	System familiarity	↓
↑	Larger bench	↓
↑	Connection to a larger group	↓
↓	Build expertise	↑
↓	Commitment	↑

Our Staff Distribution



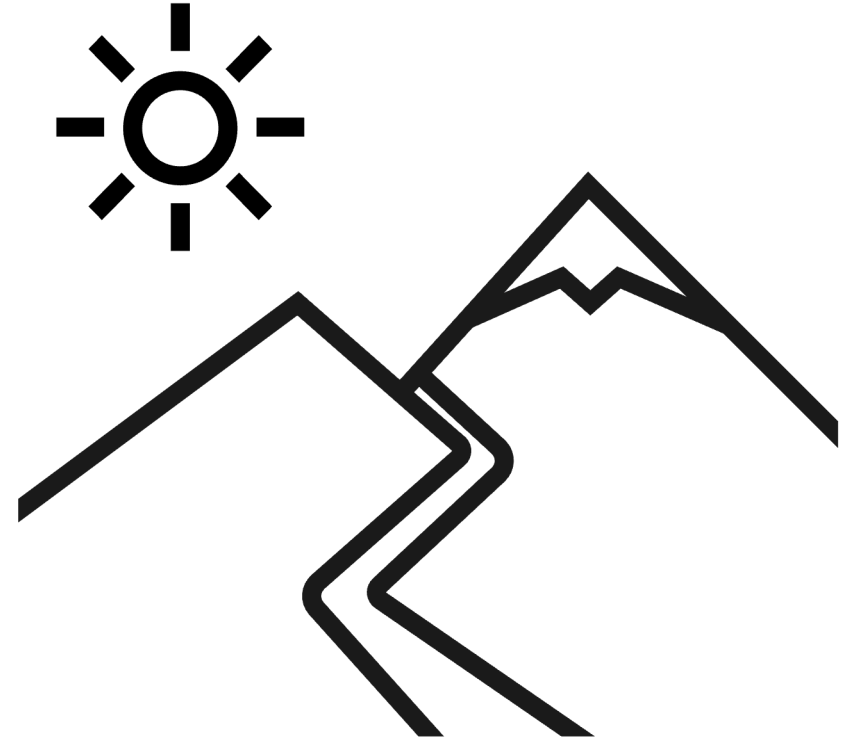
Ideal Candidate



- Patient and family-centered
- Generalist outlook/pride
- Team minded
- Creative and adaptive
- Mindful of details
- Comfortable with a diversity of people and settings
- Comfortable with risk/uncertainty
- Mission driven
- Excited by rapid innovation

Challenges to fully staffing

- 2-year Public Health Emergency
- Industry staffing shortages
- Escalating wages
- Wage differential in acute care vs. home care nursing
- High turnover
- Safety concerns

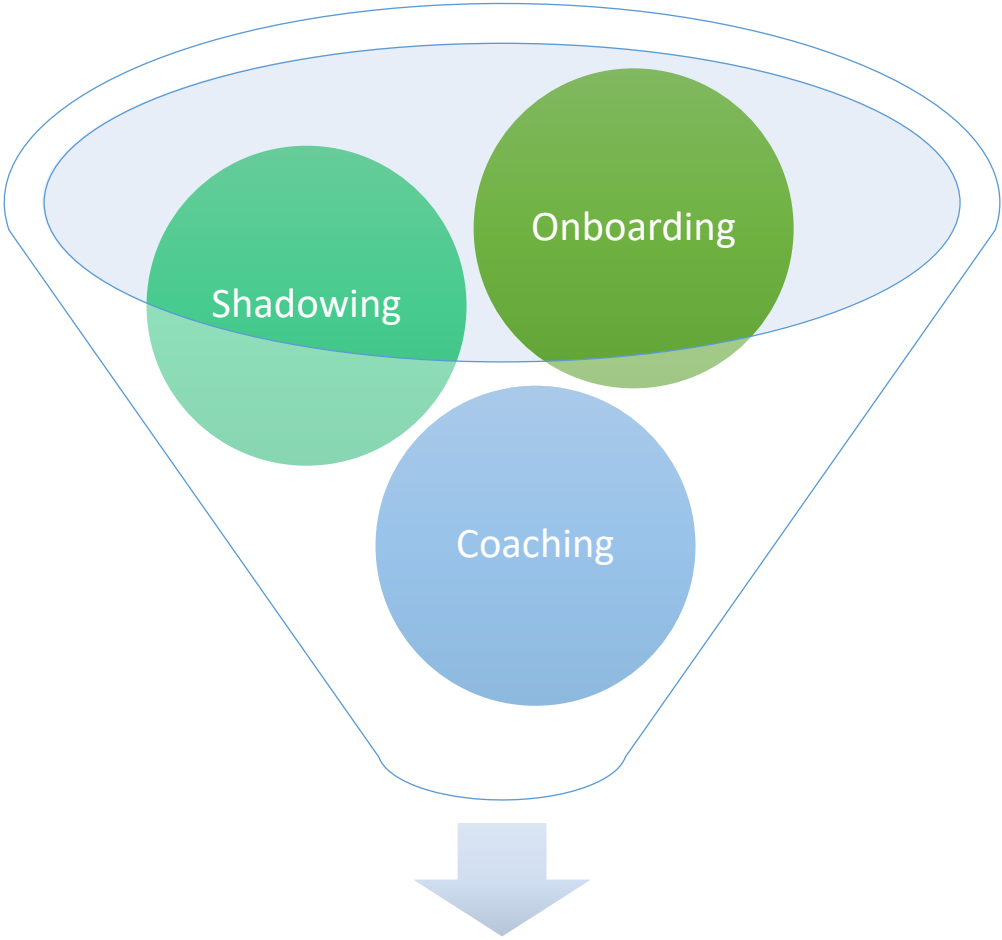




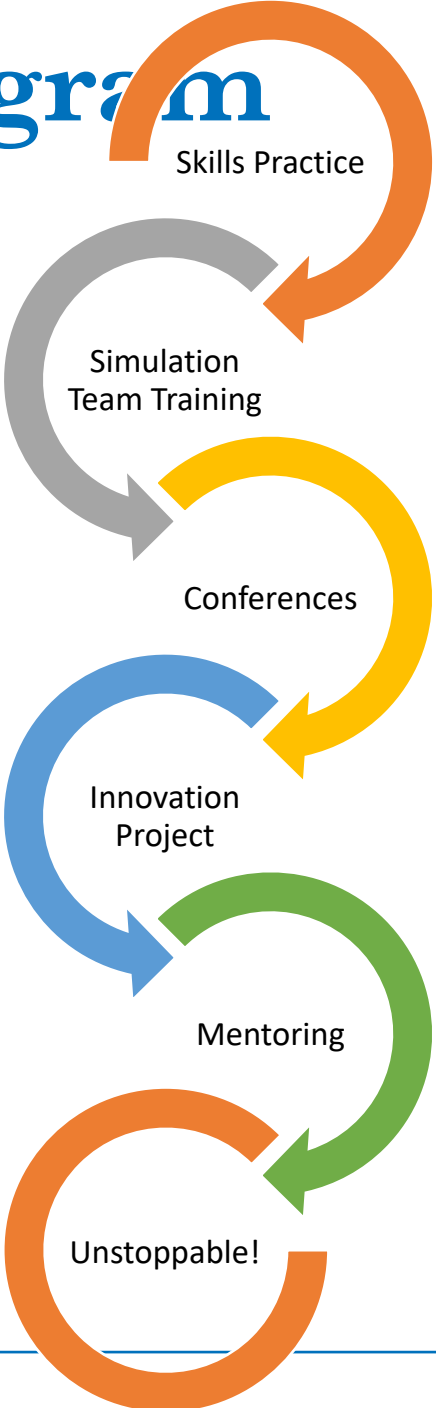
Not so secrets for ...

Retention

1st Year Attending Training Program

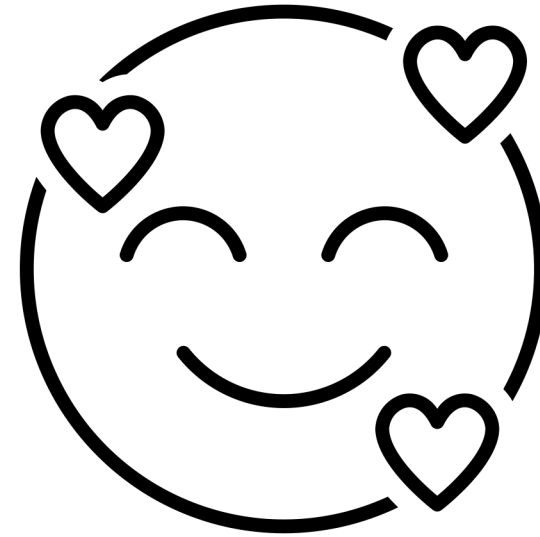


Ready to Attend!



Sustainable Model

- Overnight alarm coverage
- Urgent MIH response
- Dedicated MD admitter role
- Charge Nurse role
- Communication with and involvement of team in change
- Leadership opportunities
 - Innovation projects
 - Committee leadership and participation
 - Medical education roles



Discussion

Binge them all

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For More Information

- Join us! Hospital at Home Users Group
<https://hahusersgroup.org/>
- Hospital at Home Users Group Technical Assistance Center
<https://www.hahusersgroup.org/technical-assistance-center/>
 - **Featured Resource – Annotated CMS Waiver**
<https://www.hahusersgroup.org/technical-assistance-center/cms-waiver-requirements/options-for-addressing-the-2020-cms-waiver-requirements/>

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