EPA 3: Provide a Medical Home for Patients with Hematologic, Oncologic, or Stem Cell Transplant Needs

Supervision Scale for This EPA

1. Trusted to observe only
2. Trusted to execute with direct supervision and coaching
3. Trusted to perform with supervisor serving as a consultant for all tasks
4. Trusted to perform with supervisor serving as a consultant but for a few complex tasks
5. Trusted to perform without supervision

Description of the Activity

The medical home is a partnership between patient, family, and primary care practice, nested in the patient’s community, that optimizes access to and coordination of care and resources. Patients with disorders requiring care by subspecialists in hematology/oncology often have unique, complex needs, requiring the medical home to be located in the subspecialty practice.

The specific functions which define this EPA include:

1. Being a key facilitator and champion of patient and family centered care
2. Working in collaboration with an interprofessional team
3. Developing and maintaining a knowledge of health literacy and vulnerable populations
4. Engaging and coordinating with multiple specialists and health care professionals [e.g., primary care provider, physical therapy/occupational therapy (PT/OT), social work (SW), nutrition]
5. Developing and maintaining a knowledge of and ability to access community resources

Judicious Mapping to Domains of Competence

- Patient Care
- Medical Knowledge
- Practice-Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice
- Personal and Professional Development

Competencies Within Each Domain Critical to Entrustment Decisions*

<table>
<thead>
<tr>
<th>PC 10:</th>
<th>Providing health maintenance</th>
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<tbody>
<tr>
<td>PBLI 9:</td>
<td>Educating others</td>
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Entrustable Professional Activities
EPA 3 for Pediatric Hematology-Oncology

<table>
<thead>
<tr>
<th>ICS 3:</th>
<th>Communicating with health professionals</th>
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<tbody>
<tr>
<td>P 3:</td>
<td>Demonstrating humanism</td>
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<td>P 4:</td>
<td>Demonstrating cultural competence</td>
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<tr>
<td>SBP 2:</td>
<td>Coordinating care</td>
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<tr>
<td>SBP 3:</td>
<td>Incorporating cost awareness into care</td>
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<tr>
<td>PPD 6:</td>
<td>Providing leadership to improve care</td>
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Context for the EPA

**Rationale:** Providing a medical home with coordinated care for patients with special health care needs is the foundation for efficient and effective health care delivery. Pediatric hematology/oncology trainees must understand the components of a medical home and be able to successfully coordinate care that is multidisciplinary, comprehensive, coordinated, accessible, and patient-centered, meeting the medical, social, developmental, behavioral, educational, and financial needs of the patient and family.

**Scope of Practice:** Scope of practice involves any child from birth to young adulthood who has been diagnosed with a cancer or blood disorder who has complex needs requiring the medical home to be located in the subspecialty practice. Effective care for the pediatric hematology/oncology patient is necessarily complex, requiring in-depth knowledge of the specific needs of each individual patient and their family, as well as the resources available to meet those needs. The resources available vary widely across institutions, communities, and patient populations. Thus, this document focuses on the knowledge, skills, and attitudes required to identify individual patient/family needs, identify available resources (including other medical professionals), coordinate complex care, and lead an interprofessional team.