Curricular Components That Support the Functions of EPA 3: Provide or Coordinate a Medical Home for Patients with Complex and Chronic Rhematic Disease

A medical home is a model for the delivery of care to infants, children, and adolescents that is accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective. The role of the physician care coordinator has four essential components: 1) integration of care with the care team and consultants, 2) shared decision-making, 3) provision of a therapeutic relationship with consideration of the social, educational and cultural contexts of care, and 4) coordination of transition of care. As such, the entrustable pediatric rheumatologist will master the following curricular components:

1. Optimizing access to and integration of care with the team members and consultants
   - Works with the interprofessional team to clearly define medical home roles and responsibilities of the primary care provider and other care team members
   - Partners with and educates the primary care provider to enhance care quality
   - Communicates effectively with the care team
   - Demonstrates professional conduct with colleagues
   - Actively assists families in navigating the complexities of the health care system
   - Applies knowledge of community resources to accessing them for patients/families
   - Shares information when not readily available such as vaccine records and test results to avoid unnecessary repetition
   - Leads the interprofessional team in cases of complex multisystem rheumatic disease

2. Being a champion for patient and family-centered care
   - Educates and counsels the patient and family to provide patient- and family-centered care
   - Engages the family in shared decision making at all levels of care
   - Develops an open and trusting relationship and communicates effectively with the patient and family
   - Recognizes the social, developmental, behavioral, mental health, educational and financial needs of the patient and family and works with team members to provide community resources to address these problems
   - Identifies the patient’s and family’s strengths and needs
   - Partners with the family to develop realistic plans for change
   - Empowers the patient to engage to the extent possible in self care
   - Empowers the patient and family members to feasibly and appropriately participate in their own care coordination
3. Applying knowledge of cultural competence, health literacy and vulnerable populations in developing a therapeutic relationship with the patient and family
   - Gathers biological and psychosocial information for effective care of the patient and family and reassess at appropriate intervals
   - Applies knowledge of culture in interactions and planning with patient/family and seeks additional information about cultural background from them that may help to inform future encounters and care plans
   - Develops trust and an emotional connection with the patient and family, acknowledging and responding to emotional cues
   - Communicates with the patient and family about the diagnosis and prognosis at a level that corresponds with their health literacy
   - Provides anticipatory guidance about the underlying disease and treatments based on current guidelines and resources available for health maintenance taking patient/family understanding of the health problems and perception of their impact on daily life into account
   - Educates patients and families about available research opportunities that could offer help beyond standard of care treatment

4. Coordinating transitions of care between past, current and future providers
   - Co-creates a transition plan with the family that allows ample time to prepare mentally and emotionally as well as physically to the transition
   - Develops knowledge of available services, referral systems, insurance issues, and transition considerations

Curricular Components Authors

Lisa Imundo, Eyal Muscal, Megan Curran, Jay Mehta, Jennifer Huggins, Michael Cidon, Kabita, Nanda, Jay Nocton