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Patient Perspectives of the Doctor-at-Home Service

Daniel De Los Santos
UVM Larner College of Medicine

Erin Hunt
UVM Larner College of Medicine

Scott Mitchell
UVM Larner College of Medicine

Rachel Munoz
UVM Larner College of Medicine

Monica Rodgers
UVM Larner College of Medicine

See next page for additional authors

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Authors

Daniel De Los Santos, Erin Hunt, Scott Mitchell, Rachel Munoz, Monica Rodgers, Gregory Roy, Danielle Smith, Jolie Lavigne, Karen Lounsbury, Jan Carney, and Karen Sokol

Introduction

Home health care has been established as an effective model for reducing mortality in the elderly.¹ Beyond reducing mortality, many patients prefer receiving health care in the comfort of their homes.² The benefits of home health care extend into end-of-life care, with patients reporting greater satisfaction when in-home palliative care is added to the traditional care model.³ In addition, in-home palliative care has been shown to reduce the costs of terminal medical care by an average of \$7,552.³

The Doctor-at-Home Service, supported by the Community Health Centers of Burlington (CHCB), has offered home health care to Burlington residents since January 2015. Dr. Karen Sokol, MD, is the backbone of this program. Dr. Sokol alone provides care to 176 patients at their homes, including at-home palliative care. Dr. Sokol and CHCB hope to expand this program by hiring more providers.

Objective: To determine the impact of Dr. Sokol's Doctor-at-Home Service from the patient's perspective.

Methods

- We conducted a literature review to understand patient attitudes and outcomes associated with at-home health care programs nationally.
- We developed a survey to administer to a cohort of Dr. Sokol's patients over an 8-week period. The survey addressed topics such as barriers to healthcare, benefits to receiving care at home, and costs associated with doctor-at-home programs.
- We performed a theme analysis on the responses of 3 survey questions (Question 1, 2, and 5). Following theme analysis, 4 common themes were chosen as focus themes that reflected patient opinions. Focus themes were evaluated for number of responses recorded and compiled into a summary figure with representative patient quotations.
- Survey responses from questions 4, 6, and 9 were used to generate individual figures. An overall satisfaction score was generated using responses from question 10.
- Summary data of patient population was analyzed and included male vs female demographics, age distribution, and spectrum of diseases treated.
- Conclusions were generated by our team following data analysis and interpretation of results.

Results

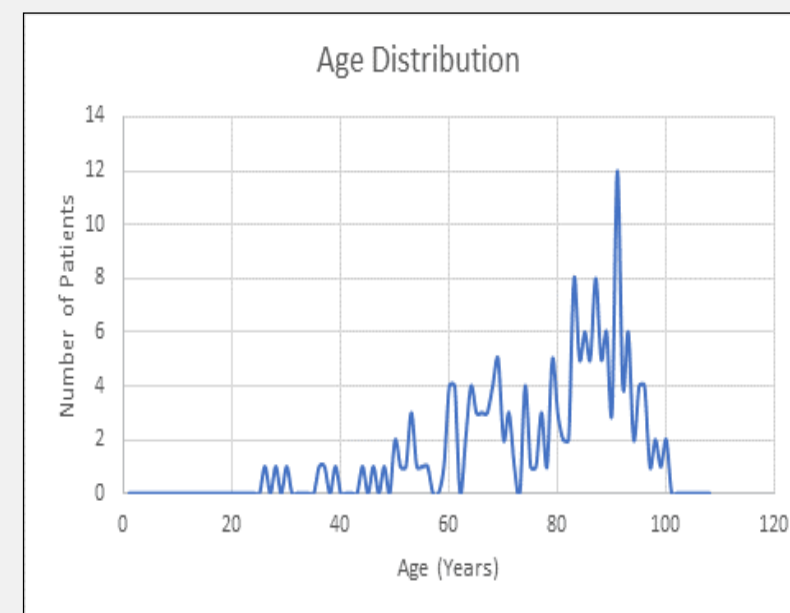


Figure 1. Dr. Sokol's Doctor-at-Home program serves patients from ages 26 to over 100 years old. The average age at first encounter is 77 years old. The majority of her practice is with senior citizens.

Spectrum of Patient Conditions 2016 - 2017

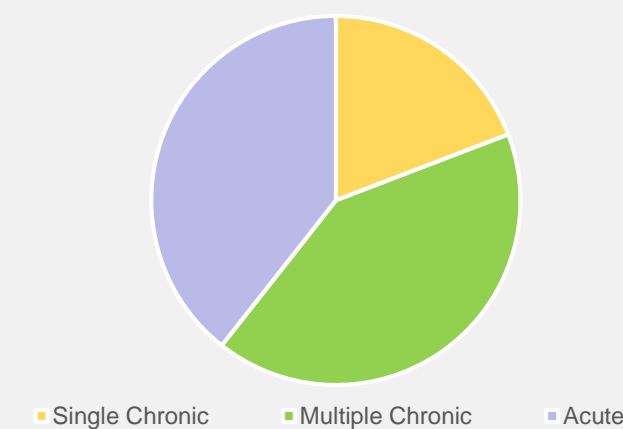


Figure 2. Out of 292 patients number being treated for acute illness (115), single chronic disease (56), or multiple chronic diseases(121).

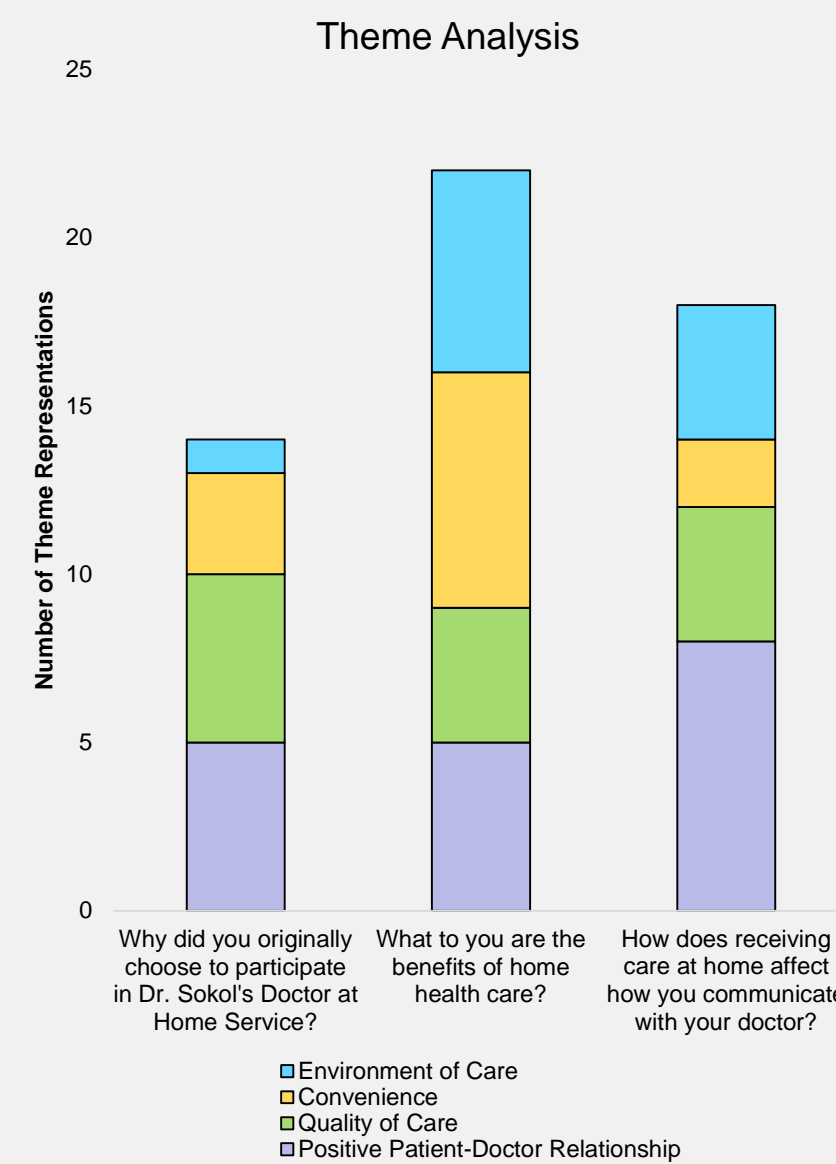


Figure 4. Thematic analysis of participant responses to survey regarding health care at home and Dr. Sokol's Doctor at Home Program. Chosen themes represent most common and ubiquitous themes demonstrated across all participant surveys.

16 out of 17 patients reported a 10/10 for patient satisfaction!

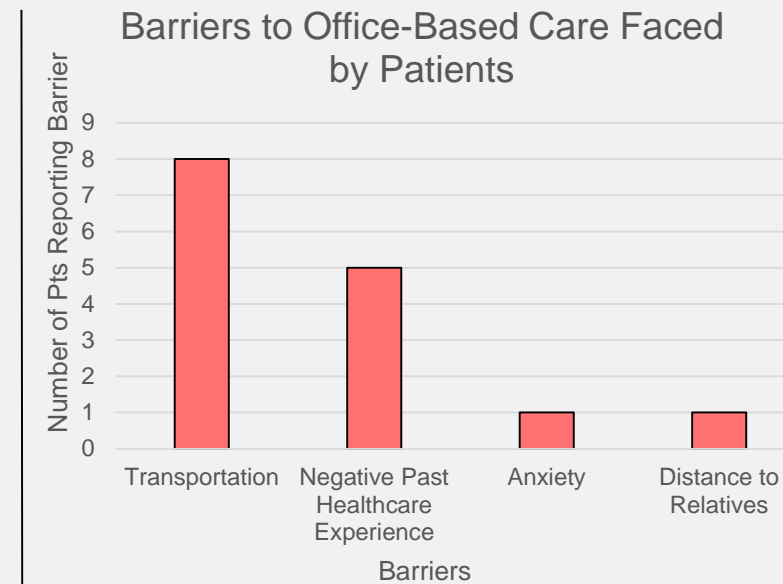


Figure 5. 17 patients were asked: "What barriers to accessing health care services, if any, did you face before the Doctor-at-Home program?". Some patients answered more than once and some didn't have a response.

Has the number of times you have been to the emergency room since starting the Doctor at Home Service increased, decreased, or stayed the same?

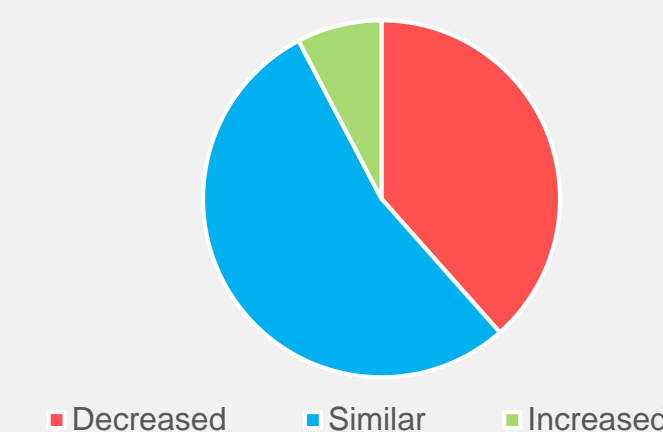


Figure 6. 38% of patients reported fewer visits to the emergency room since seeing Dr. Sokol. 13 patients responded to this survey question.

Discussion

- Convenience, quality of care, and a positive relationship with Dr. Sokol were the main reasons why patients sought out the Doctor-at-Home program and/or continue to participate in it.
- As an alternative to an office-based setting, a majority have chosen at-home care due to comfort, feeling more relaxed, fewer barriers to care, and past negative experiences with providers.
- This information shows that more expansive Doctor-at-Home programs would eliminate barriers and provide quality care to patients, especially those with specific barriers to access.
- The evidence is compelling that there is a desire and need for an extension of the Doctor-at-Home program to reach more patients or for development of other similar programs in the area.
- A direction for future study is whether the perceived quality of the care provided in the house visits is due to more time being spent with the patient or other factors.

Limitations

- The small sample size of 18 patients limited our ability to conduct a statistical analysis or generalize results beyond the population surveyed.
- Patients reported estimated out-of-pocket costs, but the cost of the program to their insurance was not determined.
- Several patients had poor cognition, making interviewing them and accurately representing their thoughts difficult.
- Without further information, it is difficult to state whether the at-home care prevented injuries or other situations that could lead to preventable visits to the ER.

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Patient Perspectives

Physician - Patient Relationship

"Dr. Sokol feels almost like a relative."

"If I wasn't able to have her as my provider, life would be a struggle."

Convenience

"If I forget something that I wanted to ask her, I have time to remember it during the hour-long visit."

"Home health to me means living better, living longer, talking like I want to, asking what I want to and not being afraid."

Quality of Care

"Dr. Sokol is completely devoted to taking an individual's personal history and concerns; no one size fits all."

"We are able to collaborate to make decisions."

Environment of Care

"I had come to err on the side of solitude rather than see a doctor; having her visit me, I need that."

"I feel more relaxed in my own home."