Senior Care Clinic
House Calls
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Disclosure

- Ron Billano Ordonia, MSN, FNP is the primary care provider (PCP) at Senior Care Clinic House Calls. Support provided by the University of California, Davis Medical Center (UCDMC), Sacramento, CA.
Objectives

• Discuss the need, the opportunity and the benefits for Nurse Practitioners working with homebound seniors

• Acquaint attendees with data collected over a period of one-year for a NP-led medical house call program for homebound seniors
The purpose of data gathering was to assess trends in the number of cases per identified diagnosis of house calls made by the nurse practitioner in a house calls private practice from its inception in the year 2014.
Literature Review

• A curious 21st century phenomenon: physicians (and nurse practitioners) reviving the house call


• Washington Hospital Center's Medical House Call Program has been offering elderly residents of the poorest area of the D.C., medical treatment in their own homes.

  (Kroll, NP, University of Texas at Tyler, 2012; Ph.D. v, 86)
Literature Review

- ER visits reduced by 30%
- Admissions reduced by 10%
- In most cases, the medical care is
  - more effective
  - less costly
  - more accessible for both the family and the health care system.


(Bader, Patricia, Brandman University, 2014; D.N.P. (85 p))
Method

• simple analysis of cases

• a total of nine months in 2014

• data obtained using the electronic health record (EHR) used by the practice.

• 20 patients at the start of the practice in February 2014 to 226 patients by end of November 2014 (a 90% increase over a period of 9 months).
*Not actual patients
Method

- Most common diagnoses:
  - Dementia
  - Hypertension
  - Diabetes
  - Hyperlipidemia
  - Kidney disease

(Counties of Sacramento and Placer in Northern California).
Results

Distribution of cases seen in 2014

- Dementia: 46%
- HTN: 21%
- DM: 16%
- Lipid: 11%
- Kidney: 5%
Conclusion

- Suggest further studies.

- Dementia with presenting co-morbidities: great challenge for medical/ nursing management.

- Challenges to caregivers.

- House calls by a medical provider: opportunities to address the challenges, medication management, symptom management, and others.
Conclusion

- Study limitation
  - One year of a nurse practitioner practice.
  - Practice area studied.
  - We cannot make generalized statements about physician's or nurse practitioner’s practice patterns.
Implications for Practice

• The United States is currently faced with the challenge of how and where to care for its aging population. Nurse practitioner (NP) home-based care is a potential solution to meet this challenge. Current research indicates that care provision by advanced practice nurses reduces cost, decreases length of stay and readmission to hospitals, and improves patient quality of life. Advanced practice nurses are able to fill the provider gap for aged patients.

(Kroll, NP, University of Texas at Tyler, 2012; Ph.D., v, 86).
“The exam room is your living room.”

-Senior Care Clinic House Calls