What is a Medical Home?

Medical Home was introduced by the American Academy of Pediatrics almost 50 years ago as having a central source for all medical information for a child, particularly those with special healthcare needs. Since then, the concept has grown into a model of patient-centered care that all individuals can adapt to obtain maximum healthcare outcomes for themselves and their families. This concept has been endorsed by the American Academy of Pediatrics, American Academy of Family Physicians.

In a medical home, the patient/caregiver and primary care provider are central in all planning and communication involved in the development, care and well-being of the patient. This whole person approach will look different for each individual. For a patient with special healthcare needs, it may include some of the teams in the diagram above. A medical home engages a network of collaborators to share information and work together to achieve the goals of the patient / caregiver and the primary care provider.

Medical Home Principles

- **Patient/Family Centered**: A partnership among practitioners, patients, and their families ensures that decisions respect patients’ wants, needs, and preferences, and that patients have the education and support they need to make decisions and participate in their own care.
- **Accessible**: Patients are able to access services with shorter waiting times, "after hours" care, 24/7 electronic or telephone access.
- **Compassionate**: The provider exhibits empathy when listening to patients with full attention and communicates with families effectively in a way that is easily understood.
- **Comprehensive**: The team of care providers takes a “whole person approach” for a patient’s physical and mental health care needs, including prevention and wellness, acute care, and chronic care.
- **Coordinated**: Care is organized across all elements of the health care system, including specialty care, hospitals, home health care, community services and supports.
- **Continuous**: The patient’s relationship with the primary care doctor is developed and strengthened over time by seeing the same provider at each visit and communicating with this person when questions or concerns arise outside of the medical office.
- **Culturally Effective**: The team is aware of and values the patient’s culture and religious beliefs and considers these when prescribing treatment and care.
How do I create a medical home?

- Begin a conversation with your family practice. Explain that the relationship with your primary care provider is strengthened by seeing the same provider at each visit.
- Find out what tools your provider prefers to communicate when you are not at an office visit. Many practices have online patient portals to submit questions and exchange information, ask if these are available.
- Ask if your practice is a certified medical home provider. If they are not, speaking to their quality improvement representatives about your desire to create a medical home for you and your family is a great place to start.

To learn more about setting up a Medical Home contact NH Family Voices at (603) 271-4525 or nhfamilyvoices@nhfv.org.

New Hampshire Family Voices provides free, confidential services to families and professionals caring for children with chronic health conditions and/or disabilities through funding from NHDHHS, Special Medical Services Bureau, and Health Resources and Services (HRSA)/Maternal Child Health Bureau (MCHB)/Division of Services for Children with Special Health Needs (DSCSHN), through grant # H84MC09488. Portions of this content were adapted from medicalhome.org.