What's A Medical Home?

A *medical home* is not a building, house, or hospital, but rather an approach to providing health care services in a high-quality and cost-effective manner. Children and their families who have a *medical home* receive the care that they need from a pediatrician or physician (pediatric health care professional) whom they know and trust. The pediatric health care professionals and parents act as partners in a *medical home* to identify and access all the medical and non-medical services needed to help children and their families achieve their maximum potential.

The American Academy of Pediatrics believes that all children should have a medical home where care is accessible, family-centered, continuous, comprehensive, coordinated, compassionate and culturally competent. Examples of these elements include:

Accessible

- Care is provided in the child's or youth's community
- All insurance, including Medicaid, is accepted and changes are accommodated
- Families or youth are able to speak directly to the physician when needed

Family-Centered

- Recognition that the family is the principal caregiver and the center of strength and support for children
- Unbiased and complete information is shared on an ongoing basis
- The family is recognized as the expert in their child's care, and youth are recognized as the experts in their own care

Continuous

- Same primary pediatric health care professionals are available from infancy through adolescence and young adulthood
- Assistance with transitions, including those to other pediatric providers or into the adult health care systems, are planned and organized with the child and family

Comprehensive

- Health care is available 24 hours a day, 7 days a week, 52 weeks a year
- Preventive, primary, and tertiary care needs are addressed
- Information is made available about private insurance and public resources

Coordinated

- A plan of care is developed by the physician, child or youth, and family and is shared with other providers, agencies, and organizations involved with the care of the patient
- A central record containing all pertinent medical information, including hospitalizations and specialty care, is maintained at the practice
- Families are linked to support, educational, and community-based services

Compassionate

- Concern for well-being of child and family is expressed and demonstrated
- Efforts are made to understand and empathize with the feelings and perspectives of the family as well as the child or youth

Culturally Effective

- Family's cultural background, including beliefs, rituals, and customs, are recognized, valued, and respected, and incorporated into the care plan
- All efforts are made to ensure that the child or youth and family understand the results of the medical encounter and the care plan, including the provision of (para)professional translators or interpreters, as needed

The ideal source of a child's *medical home* is a primary care physician working in partnership with the child's parents. Medical care may be provided in various locations, such as physicians' offices, hospital outpatient clinics, school-based and school-linked clinics, community health centers, and health department clinics. Regardless of the venue in which the care is provided, to meet the definition of a medical home, the designated physician must work to provide services that meet all of the criteria set forth in the American Academy of Pediatrics policy statement on medical home.[1]

[1] Medical Home Initiatives Project Advisory Committee. 2002. The Medical Home. *Pediatrics* 110; 184-186.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™