

Component 2: The Culture of Health Care

Unit 3: Health Care Settings— The Places Where Care Is Delivered

Lecture 2

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Objectives of This Lecture

- Review the various types of hospitals that care for U.S. patients
- Review traditional health care providers found in nontraditional settings
 - School-based health centers
 - Community health centers
 - Employer-based clinics or mobile health care

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U.S. Hospitals, 2009

- Total: 5795
- Of these, 5008 were community hospitals
- The rest were:
 - Psychiatric hospitals (444)
 - Federal government hospitals (211)
 - Long-term-care hospitals (117)
 - Hospital units of colleges, prisons, etc. (15)

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Government Hospitals

- Veterans hospitals
- Military hospitals
- Indian Health Service
- Public “safety net” hospitals
 - Local, state, or federal

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Veterans Health Administration (VHA) Hospitals

- Part of U.S. Department of Veterans Affairs
- Ensure America’s veterans receive medical and social support
- Provide care through network of hospitals and outpatient clinics
- Partner with academic health systems
- Train new health care professionals
- Engage in important medical research

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Military Hospitals

- Part of the U.S. Department of Defense (DoD) Military Health System
- Ensure delivery of world-class health care to all DoD service members, retirees, and their families
- Each armed-forces branch has its own network of hospitals
- TRICARE partnership network ensures accessibility of care
 - Military facilities
 - Private-sector/civilian hospitals, providers, and pharmacies

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Indian Health Service (IHS)

- Agency within the U.S. Department of Health and Human Services
 - Provides health services for American Indians and Alaska Natives
 - Goals are to ensure access to health services and reduce health disparities
- Federal IHS system includes 28 hospitals, 63 health centers, 31 health stations, and 34 urban projects
- American Indian tribes and Alaska Native corporations independently administer 17 additional hospitals, 263 health centers, 92 health stations, and 166 Alaska village clinics
- Additional services are contracted through private providers

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Public Hospitals

- Government-funded "safety net" hospitals
 - May be publicly owned and operated, or run by nonprofit organizations
- Provide services for vulnerable populations
- Multiple funding sources
 - Medicare
 - Medicaid
 - Commercial (private) insurance companies
 - Patient self-pay (sliding scale)

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Private Hospitals

- Nonprofit or for-profit
- Various types:
 - Community hospitals
 - Managed care consortium hospitals
 - Trauma centers
 - Academic medical centers and teaching hospitals
 - Tertiary care centers

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Community Hospitals

- Non-governmental
- Open to the public
- Treat acute illness of injury
- Short-term stay
- Contract with a variety of public and private insurers to provide services

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Managed Care Consortium Hospitals

- Operated by a private managed care consortium or health maintenance organization (HMO)
- Not open to the public (except for emergency situations)
- Exclusively serve members of the consortium or HMO

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Trauma Centers

- Provide comprehensive emergency medical services for traumatic injuries
- Trauma center *designation* determined by state law
- *Capabilities* verified and ranked by the American College of Surgeons
 - Level I: Comprehensive service
 - Specialists and equipment available 24 hours per day
 - Active research programs
 - Leader in trauma education and injury prevention
 - Referral resource for communities in nearby regions

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Trauma Centers (cont'd)

- Level II: Work in collaboration with level I center
 - 24-hour availability of essential specialties and equipment
- Level III: Limited care
 - Have resources for emergency resuscitation, surgery, and intensive care of most trauma patients
 - Do not have the full availability of specialists comparable to level I or II
 - Maintain transfer agreements with level I & II centers

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Academic Medical Centers

- Each is made up of a medical school and affiliated teaching hospitals and clinics
- Provide routine and highly specialized care
- Education and medical research are integral to their operation
- Care for underserved populations
- Provide access to doctors specializing in rare and severe diseases, complex procedures

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Teaching Hospitals

- Central to the academic medical center
- Serve as the medical school “classroom”
- Provide physician and nurse trainees with direct patient-care experience
- Patient care plans are supervised by experienced, senior-level medical staff
- Patients benefit from care by a team of health professionals

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Tertiary Care Centers

- Centers that provide specialized consultative care and treatment, for example:
 - Cancer centers
 - Neurosurgery center
 - Burn treatment center
 - Reconstructive surgery
- Usually require referral from primary or secondary medical care provider

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Long-Term-Care Hospitals

- Hospitals that focus on patients who require long (>25-day) hospital stays and critical or intensive care
- Specialize in seriously ill patients who have a favorable chance of improving and returning home after recovery
- Not the same as long-term-care facilities such as assisted living and nursing homes

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Inpatient Hospice Care

- Hospice care focuses on caring for patients at the end of life
 - Palliative medical care (comfort care)
 - Pain management
 - Emotional support
- Usually conducted on an outpatient basis
- Inpatient hospice available for patients needing more care than can be given at home
- Usually provided in dedicated hospice facilities, hospitals, or nursing homes

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School-Based Health Centers

- Designed to serve all students, with a focus on the uninsured and underserved
- Staffed by a team of professionals
 - Physicians and nurse practitioners
 - Clinical social workers and psychologists
 - Dentists and dental hygienists
 - Nutritionists
- Refer to qualified health provider for clinical services
- Reduce health-related absences and improve learning-readiness

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Community Health Centers

- Publicly funded, primary-care "safety net" for populations with limited access to health care
- Located in medically underserved areas (MUAs)
- Provide primary care as well as supportive services
 - Education
 - Translation
 - Transportation
- Fees charged on income-based sliding scale

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Employer-Based Health Clinics

- Primary and urgent care offered on-site at the workplace
 - Occupational health, wellness programs, management of chronic (long-term) diseases
 - Permanent or mobile
- Aimed at containing health care costs
 - Employer retains greater level of control of utilization decisions
 - Shifts emphasis from illness care to preventive care
 - Reduces employee absenteeism due to doctor visits
- Growing trend—expected to serve 10% of the U.S. population under 65 by 2015

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Summary

- There are a wide variety of hospitals that serve U.S. patients
- Hospitals may be public or private, for-profit or non-profit, and offer comprehensive or specialized services
- Nontraditional health care delivery models serve special needs
 - Health care provided at the workplace is expected to reach many more workers in the next few years
