



Dr. Jamie Freelin

Regional Medical Director, Post-Acute Care
TeamHealth

In this Voices interview, Skilled Nursing News sits down with Dr. Jamie Freelin, Regional Medical Director, Post-Acute Care, TeamHealth, to talk about the growth and evolution of post-acute care, as well as the technology behind it. She explains how TeamHealth is helping clinicians optimize their care teams so they can provide the best care to their patients and patient families — even in off hours.

Editor’s note: This interview has been edited for length and clarity.

TeamHealth offers full-service, post-acute clinical practice management to partners nationwide. Our clinical and operational practice models can be tailored to our partners’ unique needs, making it the optimal solution for skilled nursing facilities, life plan and continuing care retirement communities and assisted living and independent living communities. To learn more, visit teamhealth.com/post-acute.

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Q: Skilled Nursing News: What career experiences do you most draw from in your role today?

Dr. Jamie Freelin: For me, one of the most important things, clinically, is ensuring that I and other clinicians in our organization provide quality care — that we are true advocates for this patient population. I do feel that, unfortunately, the population we serve is often not given the full attention they need and deserve. I'm very passionate about leading an organization of clinicians to provide that care. I'm also passionate about clinicians. If we don't take care of the people taking care of others, then we put our health care system in a bind.

Q: Skilled Nursing News: Tell us about the importance of providing seamless clinical care coverage during the 7:00 PM to 7:00 AM shift.

Freelin: I think we can all understand that there's no timeline for when someone needs a clinician or experiences a health event. It usually occurs at an awkward time. Holidays, weekends, during the middle of the night; it's just like inpatient medicine in the post-acute space. Our residents and patients become ill and need the expertise of a clinician at any given time, and many times it does not fall into that nine-to-five, Monday through Friday window.

Because of that, we need quality clinicians who understand the post-acute care space. They understand the regulations of post-acute care in the skilled nursing facility setting. They understand the barriers of treatment therapy modalities to be available to assist these facilities, their staff and their patients with any clinical issue or scenario.

The easy response would be, "Well, someone is declining, someone is not at their baseline, let's send them to the emergency room." Often that is very troublesome for a facility that might be short-staffed because it's quite a process to get patients to the hospital. It overwhelms our inpatient systems and fails to serve the best interest of the patient.

These patients are typically fragile. They could be experiencing dementia, so going outside of the space that they are accustomed to can often be traumatic and scary for them. The best thing we can do is keep them in the environment that they are accustomed to and skill them in place. It requires 24/7-365 availability of clinicians who know how to do this in order to accomplish that task.



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Q: Skilled Nursing News:
How do TeamHealth's
call solutions
address SNF staffing
challenges?

Freelin: I wish I could say that staffing challenges did not exist, but unfortunately, they do. They do on a lot of different levels, not just at the clinician level, but also at the facility level. Administrators, nurses, nursing assistants, housekeepers, clinicians; everyone is feeling the strain of being short-staffed right now. We're all in this together, especially with respect to educating others on post-acute care medicine.

Medicine that is pertinent to skilled nursing facilities, assisted living facilities, independent living facilities and memory care units is not emphasized much, if at all, within medical school and training. There's just a lack of knowledge and awareness around the field and the career opportunities it offers.

It's not as rigorous as the hospital inpatient setting from a scheduling standpoint, but it does offer the acuity and relationship development opportunities an inpatient setting offers. We should be educating others about how post-acute care is marrying the worlds of hospital medicine and outpatient medicine together with respect to clinical scenarios and work/life balance.



Overall, call solutions benefit the care team because they are a part of the care team. Not everything happens during routine business hours. Every hour of every day, there has to be an educated, trustworthy and responsive team in place to ensure quality care for the patient. That culture of trust allows every member of the care team, from social workers to aids to nurses, to do their job effectively and confidently.

Q: Skilled Nursing News:
How does this solution
impact the patient's
family members?

Freelin: When we have a loved one in a skilled nursing facility setting, it's often scary. We're not quite certain what's going on at every minute, of every hour, of every day. That fear of the unknown will keep someone up at night, but when your clinician is truly integrated into the facility culture and team, it helps alleviate some of those fears and concerns. Over time, as relationships develop, not just with the resident or the patient, but with their loved ones and family members, then that trust develops as well.

Q: Skilled Nursing News:
How does it benefit
the care team?

Freelin: Overall, call solutions benefit the care team because they are a part of the care team. Not everything happens during routine business hours. Every hour of every day, there has to be an educated, trustworthy and responsive team in place to ensure quality care for the patient. That culture of trust allows every member of the care team, from social workers to aids to nurses, to do their job effectively and confidently.

Q: Skilled Nursing News:
**What type of growth
can post-acute
providers expect from
virtual innovations like
call solutions?**

Freelin: The world is our oyster. If you go back years before hospital medicine was mainstream, clinicians would get up early in the morning, make their inpatient, office and nursing home rounds, then swing by the hospital on their way back home to catch a few hours of sleep (while on call). That's how hospital medicine was born.

When you think about it from a common sense standpoint, GI bleeds, strokes, heart attacks and other events present at any hour of the day, not just right before the doctor goes to their office or right after office hours before they go home. That's why we began to recognize the constant need for clinicians, doctors, nurse practitioners and physician assistants in the hospital time to deal with those situations. Also, it's best for the clinicians. The old way of doing things was exhausting. It increased the risk of burnout and even the risk of medical errors as clinicians ran themselves ragged.

Now years later, it's the norm to have outpatient clinicians dealing with outpatient medicine and inpatient hospitalists dealing with inpatient cases. We still have that gray area, but now we're seeing a lot more growth and evolution in post-acute care. We are now understanding that this population of patients is growing.

As people in our population get older and live longer, they will need a clinical workforce that is dedicated to them. That is what we offer, and this is our world. This is what we know, and this is our area of expertise, but we still have a long way to go. While we can't take everything off of their plate, we can certainly offer the opportunity to get a good night's sleep. We can take those off-hours calls and remotely take care of those patients.

Our care teams know that when there is an issue, there are clinicians well-versed in post-acute medicine that are going to handle the situation on the other end of the line.



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Q: Skilled Nursing News: Finish this sentence:

The top strategy that post-acute care providers should employ in 2022 to best prepare for 2023 is...

“Collaborate with clinicians you can trust to provide the best care for the residents filling your beds.”