Patient-Centered Care: How Are We Doing? How Can We Improve?

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Overview

- What is patient-centered care?
- Why is it important?
- How can it be measured?
- How is the nation performing?
- What does it take to improve?
## IOM’s 6 Aims for Improvement

<table>
<thead>
<tr>
<th>Safety</th>
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<tbody>
<tr>
<td>Effectiveness</td>
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<tr>
<td><strong>Patient-Centeredness</strong></td>
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<td>Timeliness</td>
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<td>Efficiency</td>
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<td>Equity</td>
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IOM Definition

“Health care that establishes a partnership among practitioners, patients, and their families...to ensure 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.”

Picker Dimensions

- Respect for patient values, preferences
- Coordination and integration
- Information, communication, education
- Physical comfort
- Emotional support
- Involvement of family and friends
- Transition and continuity
- Access to care

Patient-centered care is strongly correlated with other key outcomes

- **Health Outcomes:**
  - Patient adherence
  - Process of care measures
  - Clinical outcomes

- **Business Outcomes:**
  - Patient loyalty
  - Malpractice risk
  - Employee satisfaction
  - Financial performance

Approaches to measuring patient-centered care

- Patient surveys
  - Home-grown and proprietary surveys (focus on “satisfaction”)
  - CAHPS (focus on “patient experience”)
- Focus groups and interviews
- Walkthroughs
- Shadowing
- “Mystery shopping”
- User-posted online ratings and reviews
How is the U.S. health system performing?

- Most patients rate their personal doctors highly
  - 60% of all health plan enrollees rate their doctors either 9 or 10 on a 0-10 scale
  - 75% of Medicare enrollees rate their doctors 9-10

- The picture changes when patients report on their actual experiences in getting needed care
  - Less than half of Medicaid and commercial enrollees report always getting the care, tests, and treatment they needed

### Percentage of adult patients reporting gaps in doctor communication, 2005 (International)

<table>
<thead>
<tr>
<th>Issue</th>
<th>AUS</th>
<th>CAN</th>
<th>GER</th>
<th>NZ</th>
<th>UK</th>
<th>US</th>
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</thead>
<tbody>
<tr>
<td>Regular doctor did not always discuss care and treatment choices and ask for patient's opinion</td>
<td>46</td>
<td>40</td>
<td>42</td>
<td>37</td>
<td>50</td>
<td>50</td>
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<tr>
<td>Regular doctor did not always make clear the specific goals for care or treatment</td>
<td>21</td>
<td>22</td>
<td>22</td>
<td>16</td>
<td>27</td>
<td>27</td>
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<tr>
<td>Regular doctor did not always give clear instructions about symptoms to watch for and when to seek further care or treatment</td>
<td>19</td>
<td>24</td>
<td>21</td>
<td>16</td>
<td>27</td>
<td>28</td>
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<tr>
<td>Patient left a doctor's appointment without getting important questions answered (in past 2 years)</td>
<td>20</td>
<td>21</td>
<td>17</td>
<td>17</td>
<td>15</td>
<td>24</td>
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**Key:** Lower rates are better (grey = best and red = worst country performance)
Adult patients reporting poor communication with their providers in U.S., 2002-2006 (MEPS)

Percentage of patients in MA reporting poor experiences in 2009

- More than 1/3 of adult patients reported that their PCP did not always seem to know all the important information about their medical history (Knowledge of patient)
- 40% of patients reported that their PCP was not always informed and up to date about care they received from specialists (Coordination of care)
- Almost 1/3 of patients (or parents of child patients) reported they did not always receive test results from someone in the doctors office (Coordination of care)
- Almost 50% of patients who called during regular office hours reported not always getting an answer to their questions the same day (Access)

Key organizational factors in achieving patient-centered care

Based on case studies and expert interviews:

- Leadership
- Strategic vision constantly communicated
- Involvement of patients and families
- Great work environment
- Systematic measurement and feedback
- Quality of the built environment
- Supportive technology

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Strategies for Leveraging Change

At the Organizational Level:
- Leadership development and training
- Internal rewards and incentives
- Training in quality improvement
- Practical, evidence-based tools
  - Ex: *PFCC “Go Guide”*
Strategies for Leveraging Change

At the System Level:

- Public education and patient engagement
  - Campaign for Better Care
  - “Always Events”
- Accreditation and certification
  - JCAHO
  - NCQA’s PPC-PCMH
  - ABMS Maintenance of Certification
At the System Level (continued):

- Public reporting
  - HospitalCompare (HCAHPS)
  - Aligning Forces for Quality
  - Chartered Value Exchanges

- Payment reform
  - CMS Value-Based Purchasing
  - Private sector innovations
"This really is an innovative approach, but I’m afraid we can’t consider it. It’s never been done before."
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