



FUNDAMENTALS OF PATIENT-CENTERED CARE

*Modules for Providers
and Patients*



WISEWOMAN™

Well-Integrated Screening and Evaluation
for WOMen Across the Nation

April 2021

This publication was supported by the Cooperative Agreement Number CDC-RFA-DP18-1816 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention. Publication number DEDPH-WW-033021b

Table of Contents

PROVIDER MODULE.....	1
A MESSAGE TO PROVIDERS	2
INTRODUCTION TO PATIENT-CENTERED CARE	2
What does PCC look like in primary care?	3
Benefits of PCC.....	3
PROVIDER MODULE REFERENCES	4
PATIENT MODULE.....	5
A MESSAGE FOR PATIENTS	6
WHAT IS PATIENT-CENTERED CARE?.....	7
WHO’S ON YOUR TEAM?	7
WHAT SHOULD YOU EXPECT FROM YOUR HEALTH CARE TEAM?	9
WHAT ARE THE RESPONSIBILITIES OF THE PATIENT ON THE CARE TEAM?	10
PATIENT MODULE REFERENCES	12



Healthcare Professionals

*Introduction to
Patient-Centered Care*

A Message to Providers

Dear Provider:









As your partner in the WISEWOMAN initiative, Quality Insights is pleased to offer this module on patient-centered care. As the name implies, patient-centered care involves both patients and care providers, so we have included information for both:

- Healthcare Professionals – A mini-module introducing fundamentals of patient-centered care, including its benefits to both patients and clinicians.
- Patients – A separate mini-module to promote active, engaged participation in care, including rights and responsibilities and the use of shared decision making where appropriate.

The patient module is located at the end of this document so that you can share it with your own patient panel.

Introduction to Patient-Centered Care

The [Institute of Medicine](#) includes patient-centered care (PCC) as one of its six domains of quality, defining PCC as: “Providing care that is respectful of, and responsive to, individual patient preferences, needs, and values, and ensuring that patient values guide all clinical decisions” (IOM, 2001). The [Picker Institute](#) has identified eight dimensions of PCC:

8 Dimensions of Patient-Centered Care			
	Fast access to reliable healthcare advice		Clear information, communication, and support for self-care
	Effective treatment delivered by trusted professionals		Involvement in decisions and respect for preferences
	Continuity of care and smooth transitions		Emotional support, empathy and respect
	Involvement and support for family and caregivers		Attention to physical and environmental needs

What does PCC look like in primary care?

While much of the early literature on PCC focused on hospital-based care, primary care can also adapt the dimensions of PCC. The [New England Journal of Medicine](#) (NEJM) (2017) describes PCC as care that focuses more on the patient's problem than on their diagnosis. Patients have trusted, personal relationships with their doctors, characterized by two-way communication and empathy. Providers take a holistic view of the patient and offer services or referrals to services such as peer support programs,



social workers, financial counselors, mental and emotional health providers, transportation and daily living assistance, and when needed, language and literacy education. In addition to human interaction that is a cornerstone of PCC, technology-based tools such as clinical decision support in the EHR, patient portals, web- and mobile phone-based apps, and wearable technology, can be used to help patients take ownership of their health outside the clinic.

NEJM suggests that the transition to PCC requires a cultural shift in the way provider practices are designed, managed, and reimbursed. Roles must also change, with the traditional roles of patients and families evolving from passive “order taker” to “active team member.” Providers can facilitate this through the adoption of shared decision making tools such as the Statin Choice Decision Aid and other decision aids developed by Mayo Clinic and available from [carethatfits.org](#). Some practices are implementing patient satisfaction surveys, patient and family advisory councils, and focus groups to gather information to progress toward PCC.

Benefits of PCC

A 2019 study published in [BMC Health Services Research](#) explored the level of PCC delivery to patients with multi-morbidity in the primary care setting. This population was selected because primary care providers indicate that care delivery to such patients is often time consuming and challenging. The relationships among patient-centered care, co-creation of care, satisfaction with care, and physical and social well-being of patients with multi-morbidity were explored, and the study demonstrated that the eight dimensions of PCC and co-creation of care are important for satisfaction with care, physical well-being, and social well-being among patients. The study concluded that making care more tailored to the needs of these patients by paying attention to PCC and co-creation of care may contribute to better outcomes.

How can PCC benefit providers?

According to NEJM, while the primary goals and benefits of PCC are to improve individual health outcomes, providers and health systems can also benefit through:

- Improved satisfaction scores from patients and families
- Enhanced reputation of providers among health care consumers
- Better morale and productivity among clinicians and ancillary staff
- Improved resource allocation
- Reduced expenses and increased financial margins throughout the continuum of care

Source: New England Journal of Medicine Catalyst, 2017

Quality Insights provides on-site and virtual technical assistance at no cost to WISEWOMAN practice partners. Our goal is to combine up-to-date, evidence-based education with practical resources and actionable tools for every member of the care team to help practices improve patient care. To learn more, visit improve.qualityinsights.org or contact Sarah Toborowski at stoborowski@qualityinsights.org.

We hope this information proves valuable to you and that the following mini-module helps your patients become active members of your care team.

We Can Help

Quality Insights can help your practice implement PCC and team-based care. We offer workflow analysis as well as many evidence-based education resources and tools to support you. Talk to your Practice Transformation Specialist or visit improve.qualityinsights.org/Contact-Us for more information.

Provider Module References

1. Kulpers SJ, Cram, JM, Nieborer AP. (2019) The importance of patient-centered care and co-creation of care for satisfaction with care and physical and social well-being of patients with multi-morbidity in the primary care setting. BMC Health Services Research. <https://doi.org/10.1186/s12913-018-3818-y>
2. New England Journal of Medicine Catalyst. (2017). What is patient-centered care? <https://catalyst.nejm.org/doi/full/10.1056/CAT.17.0559>
3. Picker Institute. Principles of person-centred care. <https://www.picker.org/about-us/picker-principles-of-person-centred-care/>



Patients

*Partners for Good Health: You
and Your Health Care Team*

A Message for Patients

Dear Patient:

Welcome! This module is brought to you by your health care provider and team in order to help us to work together for your best possible health. You will learn about patient-centered care and how to be an active partner in the health care team. We will review your rights as a patient as well as your responsibilities. The goal is to help you be an informed and involved patient so you receive the care you want and deserve. We will follow along with the story of a patient named Angela.



Introduction: Angela's Story

Angela has been a patient of Dr. Anderson for several years. She goes to her preventive care appointments because she wants to stay healthy to take care of her family. At her recent appointment, Dr. Anderson told Angela that her blood pressure and cholesterol were higher than normal and that she may need to begin taking medications to help.

Angela is not sure she wants to take medicine. She has questions, such as:

- Do I have to start the medicine right away?
- Is there any other way to treat my blood pressure and cholesterol?
- Will I have to stay on this medicine for the rest of my life?
- What do all these numbers and terms mean?
- Will the medications have side effects?
- How much will the medicines cost?

Angela is worried about asking so many questions, but she remembers her mother's experience. When the doctor gave her prescriptions, Angela's mother was confused by what the medicine was and what it was used for. Sometimes she experienced side effects so she didn't always take it as instructed. At other times, she could not afford the medicine so she didn't fill prescriptions. Like Angela, she had questions, but she didn't feel comfortable asking them.

Angela wants a different experience from her mother. Fortunately, Dr. Anderson practices a model of health care known as patient-centered care. Dr. Anderson explains that she and the staff in her office work as a team, and Angela is part of the team as well. In fact, Dr. Anderson says that Angela is the most important part of her health care team! The doctor, the team, and Angela must work together with honest, clear communication and mutual respect to make sure Angela's care helps her to be as healthy as possible.

What is patient-centered care?

The Robert Wood Johnson Foundation¹ describes patient-centered care as taking a whole-person view of someone's health, life circumstances, and well-being to help meet their goals and needs to maintain or improve their health. Some ways your doctor and health care team do this include:

- Remembering that you, the patient, are the center of care
- Listening to your questions and concerns in making decisions about treatment
- Keeping your family members/caregivers involved according to your wishes
- Partnering in making decisions (“shared decision making”) by providing all the information you need and allowing you to make informed choices about treatment
- Respecting your values, preferences, culture, and socioeconomic circumstances

Research studies show that having a trusted partnership with your health care provider and care team is important to your health. Patients who have good relationships and effective communication with their physicians are more satisfied with their care and are better able to manage their medical problems.²

Who's on your team?

In patient-centered care, the whole staff works together as a team. This health care team will include a physician or other provider and may also include nurses, medical assistants, and other office staff. While teams may differ from practice to practice, the most important team member is the patient. Here is one model of a health care team:



Patient-Centered Medical Home Team

Depending on the circumstances, your team might also include nutritionists, clinical educators, therapists, and medical specialists. Pharmacists are also important members of the team and can answer questions about medications. Like members of a sports team, all the members must communicate clearly and trust each other to work toward the same goal—your best health.

Angela's Story: Blood Pressure

Angela knows that the staff in Dr. Anderson's office are all part of her health care team. She trusts them to communicate with each other and with her.

Angela tells Michael, the medical assistant, that she doesn't really think she has high blood pressure. She says, "I was just rushing around and nervous about getting to my appointment on time." Michael listens carefully and shares this information with Dr. Anderson.

Dr. Anderson asks, "Angela, would you be willing to take your blood pressure at home twice a day for one month so we can see if you really have high blood pressure? Then we can make a decision about what to do next."

Angela is worried, because she doesn't know how to measure her blood pressure and doesn't have the equipment needed. She thinks it might be too expensive to buy. But

Dr. Anderson says that the clinic can loan her a blood pressure monitor and teach her how to use it. Angela agrees that is a good idea and is willing to try.



Michael returns to the exam room with the monitor and takes time to demonstrate and explain it to Angela. Then he gives her a chance to practice it herself. They work together so that Angela is confident in using the machine correctly. She will return to the clinic in one month with her blood pressure measurements.

What should you expect from your health care team?

As a patient, you have some basic rights, including:³

- To be treated with dignity and respect and feel confident that your preferences, values and needs have been heard
- To receive information about your diagnoses and conditions through up-to-date and easy-to-read educational materials and programs
- To receive a full explanation of the risks and benefits of any treatments being offered so you can give informed consent before starting any treatment⁴
- To request a copy of your medical records
- To have your personal health information kept private (the Healthcare Insurance Portability and Accountability Act, also known as HIPAA)⁴
- To involve a trusted family member or friend to be your advocate in care. You might want to have your advocate:
 - Come with you to doctor appointments
 - Ask questions of your health care team
 - Help you review consent forms for treatment



In addition, you have the right to make decisions about your medical treatment through a process called shared decision making. This encourages people to play a role in the medical decisions that affect their health. There are two main parts of shared decision making:⁶

- (1) You will receive information that you can understand about your treatment options. You are given the opportunity to ask questions and express personal values and opinions about your conditions and treatment options.
- (2) The health care team will respect your goals and preferences and use them to guide recommendations and treatments.

Angela's Story: Medication

Angela decides to ask Dr. Anderson about high cholesterol. Together they discuss what the terms and numbers mean. They talk about the importance of healthy lifestyle as well as cholesterol-lowering medication. Angela is concerned because she has heard from family members that the medication has a lot of side effects. She asks for some time to think about her treatment options.

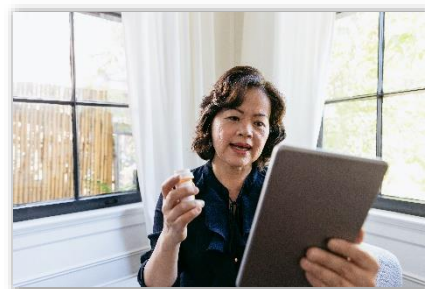
Dr. Anderson writes the prescription for Angela, but she asks if Angela would like to talk to the clinic pharmacist about cholesterol-lowering medications before deciding whether or not to take the medicine. Angela agrees, and after her appointment she walks down to the clinic pharmacy. The pharmacist sits down with her and asks about all the medications she takes, including over-the-counter, herbal supplements, and vitamins. The pharmacist answers Angela's questions about how high cholesterol affects her health. Then they work together to complete the [Statin Choice Decision Aid](#) which creates a clear picture of Angela's health risk. She decides to take the medicine and report back to Dr. Anderson when she returns to the clinic in one month.



What are the responsibilities of the patient on the care team?

As we have seen, patients are at the center of the care team. To be informed and active team members, patients have certain responsibilities, such as:

- Be truthful and strive to express concerns clearly.
- Provide as complete a medical history as possible, including information about past illnesses, medications, hospitalizations, family history of illness, and other matters related to health.
- Cooperate with agreed-on treatment plans. Tell your health care team if you have or have not followed the plan and whether you would like to reconsider the plan.
- Know the medications you take.
 - Tell the health care team if you have any drug allergies.
 - Ask for written information about medicine, including possible side effects.
 - Follow directions to take medicine as prescribed.
 - If you are taking multiple medicines, ask your doctor or pharmacist if it is safe to take the medications together. Also ask about any vitamins, herbal supplements, or over-the-counter drugs you take.



Angela's Story: Partnership for Health

Just as she learned in the clinic, for the next month Angela takes her blood pressure at home every morning and evening, writing down the measurements. She uses the brochure from the clinic to see where her measurements fall and is glad to see that they are in the normal range. Angela prepares for her next appointment by writing down her questions. When she goes to the clinic, she returns with the monitor and her blood pressure records as agreed upon. Dr. Anderson agrees that Angela does not have high blood pressure at this time.



Angela also takes the cholesterol-lowering medication for one month. She reports back to Dr. Anderson that she did not experience any side effects, but she is still not sure she wants to keep taking the medicine. She relates that she is working hard to change her diet, and she's lost 4 pounds already. Dr. Anderson asks if she would consider continue taking the medicine for six months, then she will have another blood test for cholesterol. If her cholesterol has improved, then they will reevaluate whether she needs to

continue the medicine. Angela agrees that this is a good solution.

Angela feels proud of herself because she asked all of her questions and understood her choices. She is confident that she can continue to work with her health care team and partner for her best health.



You can be a partner for good health too. Talk to your health care team to learn more.

Patient Module References

1. Sinaiko AD, Szumigalski K, Eastman D, Chien AT. Delivery of patient centered care in the U.S. health care system: What is standing in its way? 2019.
<https://academyhealth.org/events/2019-05/delivery-patient-centered-care-us-health-care-system-what-standing-its-way>
2. Moore N. Does it matter if you get along with your doctor? 2016.
<https://www.steadymd.com/2016/10/04/does-it-matter-if-you-get-along-with-your-doctor/#:~:text=Patients%20who%20have%20good%20relationships,leads%20to%20an%20accurate%20diagnosis.>
3. Role of the patient in the management of rheumatic disease. 2016.
<https://www.rheumatology.org/I-Am-A/Patient-Caregiver/Health-Care-Team/Role-of-a-Patient>
4. HHS.gov. What are my health care rights and responsibilities? 2020.
<https://www.hhs.gov/answers/health-insurance-reform/what-are-my-health-care-rights/index.html>
5. HIPAA Journal. HIPAA explained. <https://www.hipaajournal.com/hipaa-explained/>
6. Agency for Healthcare Research and Quality. The CAHPS ambulatory care improvement guide. Section 6: Strategies for improving patient experience with ambulatory care. 2017.
<https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/improvement-guide.html>