

Shared Decision-Making and Patient-Centered Care

**Conference for Healthcare Transparency and
Healthcare Advocacy
Lexington, Kentucky
November 9, 2012**

3 Challenges in Health Care

- **Coping with spiraling cost**
- **Delivering quality care**
- **Providing access to reliable care**

Major Determinants of Health

- **Social & behavioral factors 50%**
- **Environment 20%**
- **Genetics 20%**
- **Access to care 10%**

Factors Affecting Our Health

- **Poverty**
 - What are the effects of poverty?
 - Lack of Health Care, Education, Housing, Food
 - Crime, Stress in children & adults, Poor environment
- **Lack of education**
 - How do we reach people for education?
 - Home, TV, Books, Online, Schools and Colleges, Churches
- **Risky behaviors**
 - How you live life more critical to longevity than genetics
 - Tobacco use, Alcohol & drug abuse, Car crashes, Obesity
- **Access to health care**
 - Provider, Financial, Cultural, Transportation, Time

Our Healthcare System Is at a Crossroads

- Health Care is biggest item in budget (2.7T – greater than Housing).
- 311 M people, 18% without health insurance
- 739 K doctors, 16,813 new students entering medical school
- Prescription drugs increased from 3B in 1960 – 262B in 2010.
- Fewer solo practitioners, more managed care HMOs, PPOs, IPAs
- More lawsuits and threats of suits
- Inadequate preventive health care
- Wide disparities in health care
- Best doctors, nurses, hospital & academic health centers, cutting-edge research w/o best health
- Population growing older and more diverse.
- Burden of disease shifting from acute to chronic.

Speak Out and Reduce Medical Errors

◆ Mortality

- # of Americans who die each year from medical errors est. 44,000 to 98,000
- # of Americans who die in the hospital each year due to medical injuries >32,000

◆ Cost

- Cost attributable to medical error / lost income disability and healthcare cost - 17 to 29 B
- Cost attributable to administrative and clinical work, fraud and abuse in US 475 B/year

Adverse Events and Complications from Hospitalizations

- **Post-operative venous thromboembolic events <1/1000**
- **Post-operative hip fracture <0.3/1000**
- **Events associated with central venous catheters 2/1000**
- **Iatrogenic pneumothorax 0.9/1000**
- **Hospital-acquired infections in ICU 4.8-11/1000**
- **Inappropriate use of medications in elderly**

Population Data

In 2012:

- **World population – Appr. 7 B**
- **US population - 311+ M**
 - **40 M seniors**
 - **74 M children**
 - **90 M people are health illiterate**
 - **50 M are w/o health insurance**
or 17.9%

Healthcare Workforce

◆ The largest healthcare workforce is patients.

In 2000 we had:

- 782,000 Physicians
- 2 Million RNs
- 600,000 LPNs
- 1.5 M Nurse's Aides

In 2020 will need:

- > 1 Million
- 2.8 M
- 0.9 M
- 2.3 M

Why Cultural Competence Is Needed in Patient-Provider Encounters

- **Perception of disease and mental illness and their causes vary by culture**
- **Belief systems related to health, healing, and well-being are rooted in culture**
- **Culture influences help-seeking behaviors and attitudes toward health care providers**
- **Culture influences acceptance of and approaches to treatments, therapies, and interventions**
- **Patients must overcome personal experiences of bias or discrimination within the healthcare delivery system**

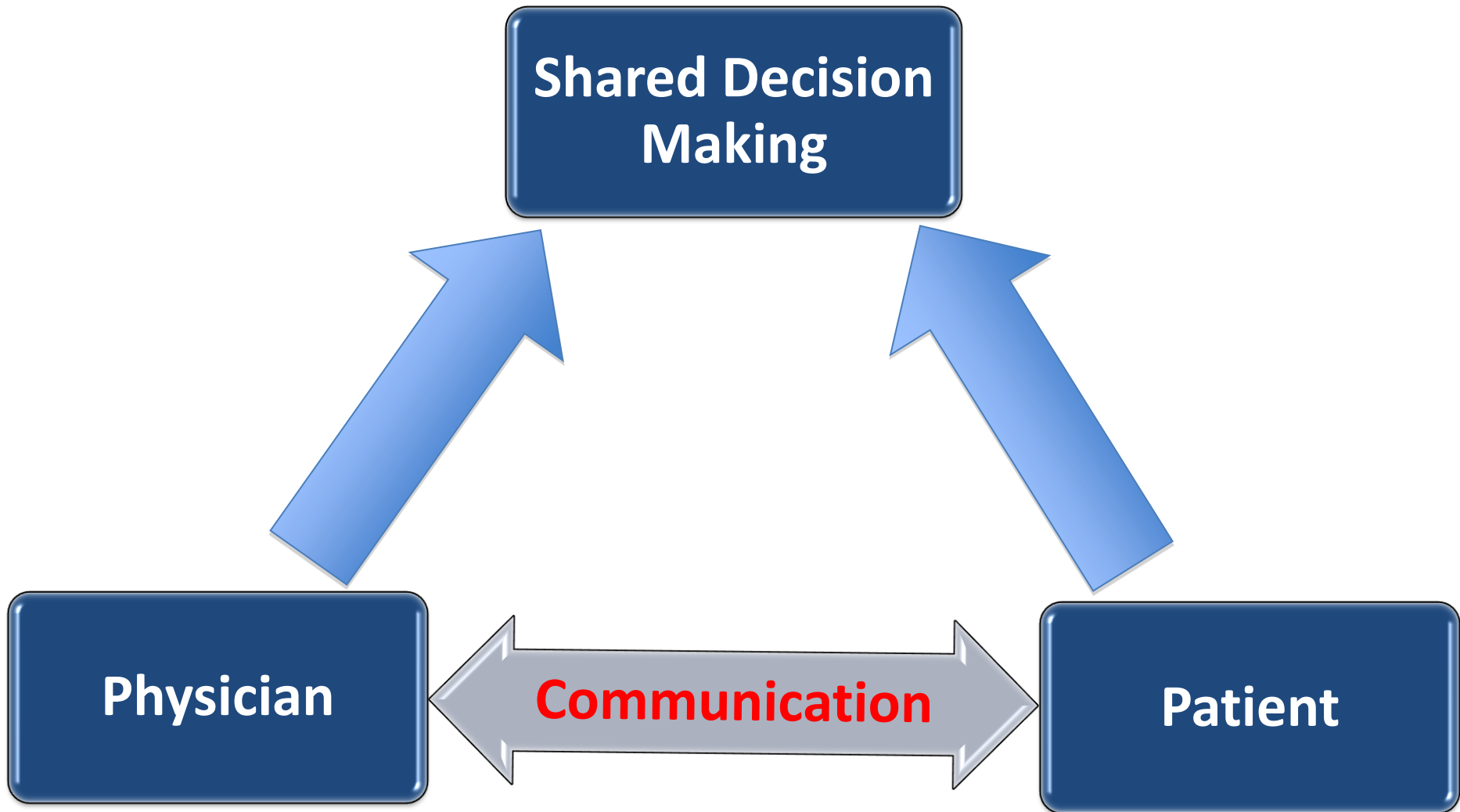
Patient-Centered Care

- **This is a term coined in 1988 by The Picker Institute to call attention to the need for clinicians, staff and healthcare systems to shift their focus away from diseases and back to the patient and family.**

Patient-Centered Care Defined by the Institute of Medicine

- **Patient-Centered Care is “respectful of and responsive to individual patient preferences, needs and values,” and it ensures “that patient values guide all clinical decisions.”**
- IOM Report Crossing the Quality Chasm, Natl Acad Press, 2001

The Pinnacle of Patient-Centered Care Is Effective Physician/Patient Communication



Characteristics of Quality and Safety from Patients' Perspective

- **Respect for the patient's values, preferences**
- **Coordinated and integrated care**
- **Clear high quality information and education for patient and family**
- **Physical comfort including pain management**
- **Emotional support and alleviation of fears and anxiety**
- **Involvement of family and friends as appropriate**
- **Continuity**
- **Access to care**

Factors Influencing Patient-Centered Care

- **Patient health problems are increasingly complex**
 - Aging of population
 - More chronic disease
 - Obesity
- **Increasing number and types of available Rx options**
- **Charges in healthcare delivery systems**
- **Promise of individualized medicine as population studies**
- **Communication**
 - Preference sensitive decisions
 - Shared decision making

A Report of the Study:

Communicating with Physicians about Medical Decisions: A Reluctance to Disagree

by

**Adams, Jared, R., Elwyn, Glyn, Legare, France,
Frosch, Dominick.**

**Arch Intern Med/Vol 172, Aug 13, 2012
www.archinterMed.com**

Participation of Patients Communicating with Physicians About Medical Decisions

Description of Participants in Study

Number of Patients in Study	1340
Age	>40 years
Gender	Half Men, Half Women
Race	White
Education	
College or >	42.6%
Retired	46.9%
Employed	46.9%
Insured	89.6%
Chronic disease	38%

Participation of Patients Communicating with Physicians About Medical Decisions, *Cont.*

Results of Survey:

Behaviors Key to Reaching a Shared Decision

- Would ask questions 93.1%
- Would discuss preferences 94.0%
- Would express disagreement 14.0%

Participation of Patients Communicating with Physicians About Medical Decisions, *Cont.*

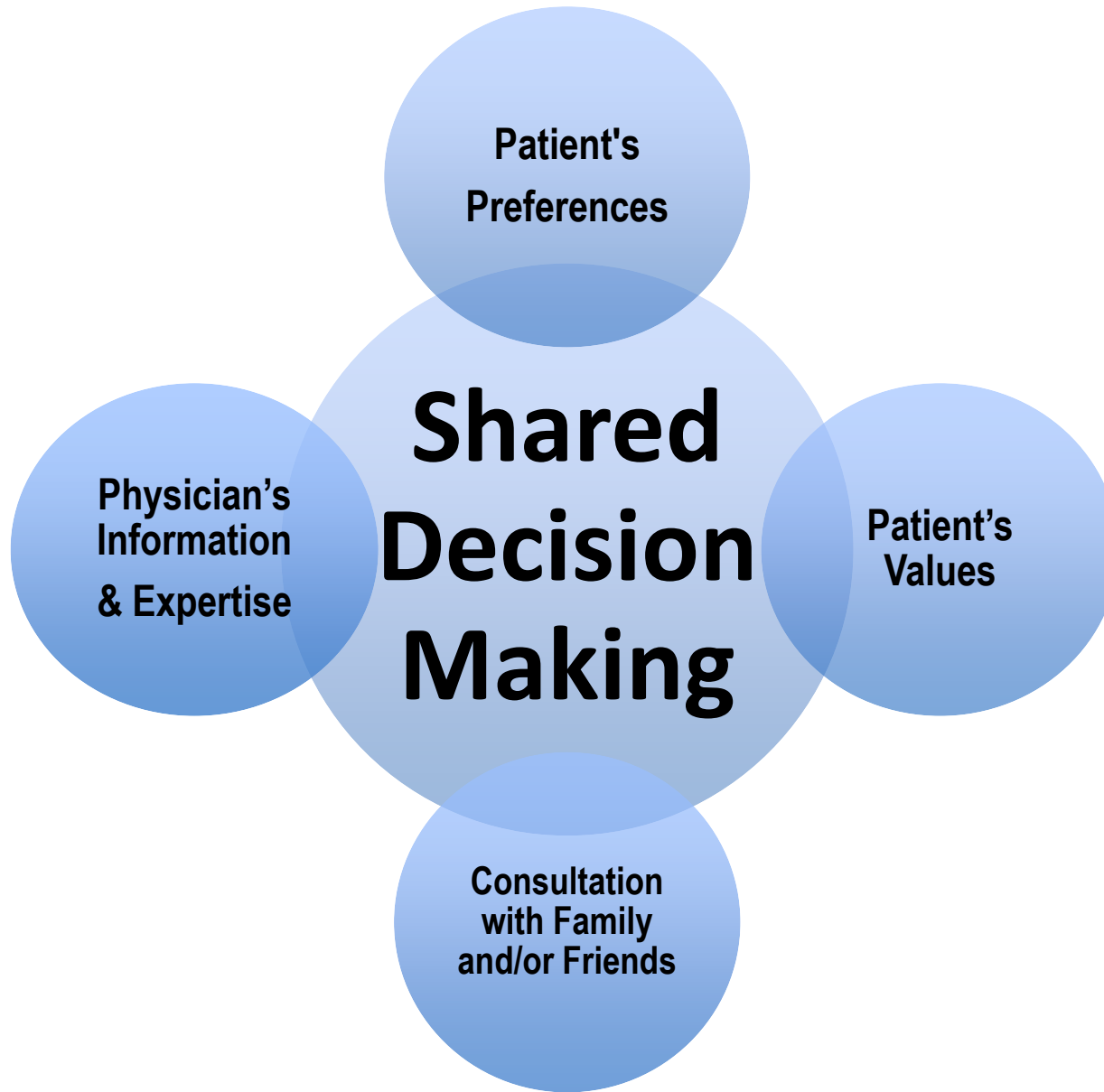
Decision-Making Role preferred

Autonomous or passive	11%
Physician (Primary)	19%
Shared	70%

Reasons for Lack of Disagreement with Physicians about Medical Decisions

Patients felt that:

- **Patient viewed as a difficult patient** **47.2%**
- **Damage relationship with physician** **40%**
- **Interfere with getting care** **51.5%**



Education Is Key to a Healthy America

- You Can't Educate People Unless They Are Healthy, and You Can't Keep Them Healthy if They Are Not Educated
- The More You Know, the Better You Heal
- JCAHO mandates patient education as part of in-patient care.



5 Steps to Safer Health Care

- 1. Speak up if you have questions or concerns.**
- 2. Keep a list of all medications you take.**
- 3. Get the results of all tests and procedures.**
- 4. Talk with healthcare team about options.**
- 5. Make sure you understand your choices.**

(20 Tips to Help Prevent Medical Error – AHRQ Publication No. 00-P038. www.ahrq.gov/consumer/20tips.htm)

Tools to Help Choose Quality Care

- **Questionnaires (prostate disease)**
- **Visual function – F-14**
- **Consumer assessment of Health Plan Survey (CAHPS)**
- **20 Tips to Help Prevent Medical Errors** (AHRQ Pub. # 00-P038)
- **5 Steps to Safer Health Care** (Pub. #OM-00-0004)
- **Put Prevention Into Practice PPIP**

7 Characteristics of Healthy People

- **Eat breakfast**
- **High fiber, low saturated fat diet with 3 meals and 3 snacks daily**
- **Exercise 20-30 minutes**
- **7 - 8 hours sleep**
- **Don't smoke**
- **Drink only in moderation**
- **Responsible sexual behavior**



8 Tests to Save Your Life

- Height, weight – BMI
- BP
- Mammogram
- PAP or PSA
- Lipid profile
- Hgb A₁C, HIV
- ECHO, EKG
- Colonoscopy



Patient-Centered Care Strategies:

- **Educational strategies**
- **Access strategies**
- **Prevention strategies**
- **Intervention strategies**
- **Strategies of compassion**
- **Research strategies**
- **Political strategies**
- **Leadership strategies**

What Is our Vision for Health in U.S.?

- **We must aim for a society of healthy individuals & healthy communities.**
- **Design & develop a healthcare system that is patient-responsive, prevention-focused & affordable for all citizens.**
- **A healthcare system that empowers individuals, fosters individual responsibility, human dignity, improved health status & enhanced quality of life.**
- **We must care enough to share & have the courage to do what needs to be done.**

Role as Healthcare Providers

- Educate, Educate, Educate
- Decisions
- United
- Communicate
- Aware, Advocate, Action plan
- Tools of commitment
- Empower

THE END

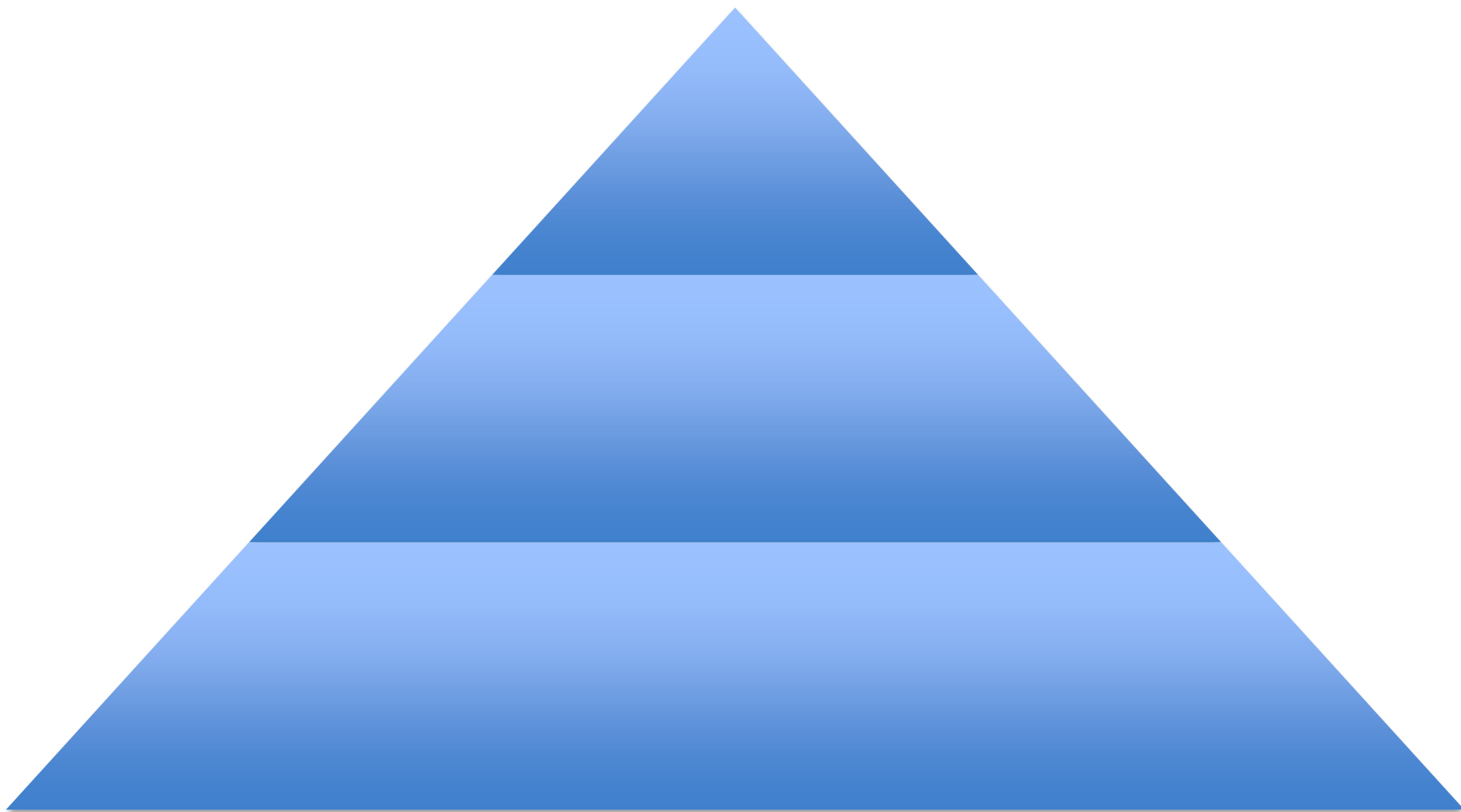
Patient-Centeredness

Patient centeredness “encompasses qualities of compassion, empathy, and responsiveness to the need, values, and expressed preferences of the individual patient.”

IOM Envisioning the national health care quality report. Wash, DC : Natl Acad. Press, 2001

“Health care that establishes a partnership among practitioners, patients and their families (when appropriate) 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.”

IOM Crossing the quality chasm: a new health system for the 21st Century. Wash, DC: National Academies Press; 2001





- **Preference-Sensitive decisions with Multiple Options**
- **Shared Decision Making**
 - Takes into account of patient preferences and values in a collaborative process with physician

Ethnic Diversity of the US Population

◆ European American	66%
◆ African American	13.5%
◆ Hispanic	15%
◆ Asian/Pacific Is.	5%
◆ Native American	<1%
◆ More than 1 race	2.4%



**Our present “healthcare”
system is a
“sick-care” system**

