Curriculum Development Centers Program

Awardee of The Office of the National Coordinator for Health Information Technology

Unit 10a: HIT and Aspects of Patient-Centered Care

Component 7 – Working with HIT Systems

This material was developed by Johns Hopkins University, funded by the Department of Health and Human Services, Office of the National Coordinator for Health Information Technology under Award Number IU24OC000013.

Learning Objectives

- By the end of this unit the student will be able to:
  - Define patient-centered care.
  - Suggest HIT-enabled solutions/strategies to enhance patient involvement in health and healthcare
  - Assess the effectiveness of HIT systems in supporting patient-centered care.
  - Perform self-assessment of personal beliefs related to HIT and patient-centered care.

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Version 2.0/Spring 2011   2

Patient-Centered Care

- What is "Patient Centered Care"?
  - "providing care that is respectful of and responsive to individual patient preferences, needs, and values" and "ensuring that patient values guide all clinical decisions."
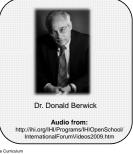- Why Important?
  - "When informed patients take an active role in managing their diabetes, and providers are prepared, proactive, and supported with time and resources, their interaction is likely to be productive."
  - "patient-centered interaction can lead to better diabetes care, more efficient and effective practices, healthier patients, and more satisfied patients and providers."   http://www.ahrq.gov/clinic/tp/pcchittp.htm#ref1

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What are the Core Concepts of Patient- and Family-Centered Care?

- Dignity and Respect
- Information Sharing
- Participation
- Collaboration

Dr. Donald Berwick

Audio from:
http://ihi.org/IHI/Programs/IHIOpenSchool/
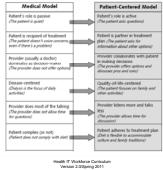InternationalForumVideos2009.htm

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Rise of the Active Patient

- "Americans' pursuit of health takes place within a widening network of both online and offline sources. Whereas someone may have in the past called a health professional, their Mom, or a good friend, they now are also reading blogs, listening to podcasts, updating their social network profile, and posting comments."

Medical Model VERSUS Patient-Centered Model

Medical Model	Patient-Centered Model
Patient's role is passive (The patient is quiet)	Patient's role is active (The patient asks questions)
Patient is recipient of treatment (The patient doesn't voice concerns, even if there's a problem)	Patient is partner in treatment plan (The patient asks for information about other options)
Provider (usually a doctor) dominates as decision-maker (The provider does not offer options)	Provider collaborates with patient in making decisions (The provider offers options and discusses pros and cons)
Disease-centered (Dialysis is the focus of daily activities)	Quality-of-life-centered (The patient focuses on family and other activities)
Provider does most of the talking (The provider does not allow time for questions)	Provider listens more and talks less (The provider allows time for discussion)
Patient complies (or not) (Patient does not comply with diet)	Patient adheres to treatment plan (Diet is flexible to accommodate culture and family traditions)

A Public Service Announcement from AHRQ.Gov

Questions Are the Answer
Medical errors cause tens of thousands of deaths each year. But you can help. Get more involved with your health care.

http://www.ahrq.gov/questionsaretheanswer/

Measuring Effectiveness of Patient-Centered Approaches

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Patient-Centered Care & Health IT

Full Title: *Enabling Patient-Centered Care through Health Information Technology (Health IT)*

Evidence-based Practice Center Review Protocol

Expected Release Date: late 2010

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http://www.ahrq.gov/clinic/tp/pcchittp.htm