



# PRIORITIES IN FOCUS

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## Person- and Family- Centered Care

A 2011 STUDY  
FOUND THAT  
PATIENT-  
CENTERED  
PRIMARY CARE  
CAN LEAD TO  
DECREASES IN  
UTILIZATION OF  
SERVICES

### THE ISSUE: PERSON- AND FAMILY-CENTERED CARE

Person-centered care, which views a person seeking care as an individual with unique needs and opinions rather than merely an ill patient, requires a strong partnership between the provider and the patient in which both sides share power and responsibility for clinical decisionmaking and care management. Patients and providers must work together to ensure that patients have access to appropriate and easily understandable information and tools to help them properly manage their health. Studies have shown that when care delivery is not person- and family-centered, patients are more likely to overutilize health care services and less likely to adhere to their prescribed care plans.

A 2011 study of adults in California used an interactional analysis instrument to characterize patient-centered primary care, and found that adults whose care team delivered a higher-than-average amount of patient-centered care throughout the year experienced significant decreases in annual numbers of visits for specialty care, less frequent hospitalizations, and fewer laboratory and diagnostic tests.<sup>1</sup> Successful person-centered care entails more than just the successful completion of clinical care; it also means that patients achieve their own desired outcomes.

### THE NATIONAL QUALITY STRATEGY SOLUTION

The National Quality Strategy calls all stakeholders to promote person- and family-centered care across the health care system by focusing on three long-term goals:

- Improve patient, family, and caregiver experience of care related to quality, safety, and access across settings.
- In partnership with patients, families, and caregivers—and using a shared decisionmaking process—develop culturally sensitive and understandable care plans.
- Enable patients and their families and caregivers to navigate, coordinate, and manage their care appropriately and effectively.

The Affordable Care Act's (ACA's) repeated references to patient satisfaction, engagement, and shared decisionmaking cemented the idea of patient-centered care as a key component in the delivery of quality health care in the United States. New care delivery models, including patient-centered medical homes (PCMHs), aim to ensure that patient treatment is coordinated through a primary care physician so that all people receive whatever care they need, in a manner they understand, from a clinician they trust.<sup>2</sup> PCMHs and other care delivery models offer to provide care that can adapt readily to individual and family circumstances, differing cultures, languages, disabilities, health literacy, and social backgrounds

60 PERCENT OF PATIENT-CENTERED MEDICAL HOMES REPORT COST REDUCTIONS

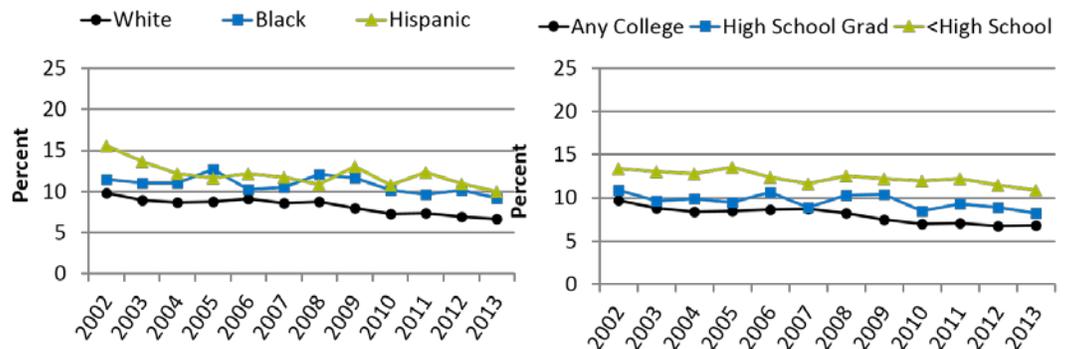
while delivering cost savings. A review of 20 studies of PCMHs published in January 2014 found that 60 percent of PCMHs reported cost reductions or reduced emergency department visits, and 30 percent reported improved population health.<sup>3</sup>

WHERE WE ARE NOW: 2015 PERSON-CENTERED CARE CHARTBOOK

The [2015 National Healthcare Quality and Disparities Report Chartbook on Person-Centered Care](#) showed strong performance on measures of person- and family-centered care. Eighty-eight percent of those measures improved, compared with 60 percent of all quality measures tracked in the report, and no person- and family-centered care measures showed worsening quality. Three measures achieved a 95 percent success rate: Children who had a doctor's office or clinic visit in the last 12 months whose health providers 1) sometimes or never listened carefully, 2) sometimes or never explained things in a way they or their parents could understand, 3) and sometimes or never showed respect for what they or their parents had to say.

A relevant measure of person- and family-centered care is the percentage of patients who reported poor communication with their health care provider, since optimal health care requires good communication between patients and providers. From 2002 to 2013, the report found that the percentage of adults who have poor communication with health providers significantly decreased for all ethnic groups and all education groups.

Adults who had a doctor's office or clinic visit in the last 12 months who have poor communication with health providers, by ethnicity and education, 2002-2013



Source: Agency for Healthcare Research and Quality, Medical Expenditure Panel Survey, 2002-2013.

Note: For this measure, lower rates are better. White and Black are non-Hispanic. Hispanic includes all races. Adults whose health providers sometimes or never listened carefully, explained things clearly, respected what they had to say, or spent enough time with them are considered to have poor communication with health providers.

<sup>1</sup>Bertakis K, Azari R. Patient-centered care is associated with decreased health care utilization. Journal of the American Board of Family Medicine May-June 2011. <http://www.jabfm.org/content/24/3/229.long>

<sup>2</sup>ACP American College of Physicians. What is the Patient-Centered Medical Home? (n.d.).

[http://www.acponline.org/running\\_practice/delivery\\_and\\_payment\\_models/pcmh/understanding/what.htm](http://www.acponline.org/running_practice/delivery_and_payment_models/pcmh/understanding/what.htm)

<sup>3</sup>Nielsen M, Olayiwola J, Grundy P, Brumbach K. Patient-Centered Primary Care Collaborative. (2014). The patient-centered medical home's impact on cost & quality: an annual update of the evidence, 2012-2013.

<https://www.pcpc.org/sites/default/files/resources/Executive%20Summary%20Only%20with%20Evidence.pdf>