Deep Dive – Person-Centered Care

Person-centered Care

Understanding system performance from the perspective of the user of the system is critical to assessing overall function as well as improvement initiatives. Person-centered care involves engaging with people as equal partners in promoting and maintaining their health and assessing their experiences throughout the health system, including communication, trust, respect, and preferences.
Person-Centered Care is a function of High-Quality Primary Health Care
Person-Centered Care is a function of High-Quality Primary Health Care

High-Quality Primary Health Care
- First-Contact Accessibility
- Continuity
- Comprehensiveness
- Coordination
- Person-Centered

First Contact Accessibility
Continuity
Comprehensiveness
Coordination
Person-Centered
What is Person-centered Care?

**What it is:** Learn more about the core principles and goals of Person-Centered Care and its role in PHC improvement.

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How do I assess my performance?

**What it is:** Learn more about some indications that improvements might be relevant in your context and what you can achieve by focusing improvements on Person-Centered Care.

**Vital Signs Profile:** Use the information in your Vital Signs Profile to help determine relevant areas for improvement.

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How do I get started?

**What others have done:** Learn from implementation approaches and challenges in other country contexts.

**How to succeed:** Consider your country context, what elements are not functioning properly, and what needs to be in place to support effective improvements.

**What to ask:** Use guiding questions to help determine how you might begin to plan and enact reforms in your country context.

**Guided by the above considerations and relevant resources, start to build out an improvement plan with your CE lead and/or focal point**
What can my country achieve by focusing on Person-Centered Care?

Goals & Outcomes

- **Trust** in the health care system through engaging with people as equal partners in their health
- **Educated and supported** patients who make informed decisions about their care
- **Optimized value and clinical outcomes** within the system by improving system performance from the perspective of the user
- **Improved job satisfaction** of the health workforce
- **Greater efficiency and cost effectiveness** in health service delivery
Person-Centered Care

How do I assess my performance?

Learn more about whether you should focus on Person-Centered Care in the Vital Signs Profile.
How do I assess my performance?

Completion of a Vital Signs Profile gives countries a holistic understanding of PHC strengths and weaknesses, a critical first step in the measurement for improvement pathway.

Use the information in the Vital Signs Profile to help determine relevant areas of improvement.
What are other indications that Person-Centered Care might be an appropriate area of focus?

Other Indications

- **Poor quality and distrust**
  Patients feel that care is of poor quality and do not have established longitudinal relationships with care providers who know their care history.

- **Low patient engagement**
  A significant portion of the population does not have the educational support to make informed decisions about their care.

- **Low or mismatched care-seeking behavior**
  Patients are under-utilizing care altogether or over-utilizing higher levels of care for needs that can be addressed in at the PHC level.

- **Lack of support for providers**
  Providers or organizations receive little to no incentives, trainings, or operation support for providing holistic quality care.

- **Lack of governance and accountability**
  No formal system for participatory approach to policy formulation, decision-making, and performance evaluation at all levels of the health system.

- **Poor health outcomes**
  The population experiences significant morbidity and mortality from preventive causes.
Learn more about the core principles of Person-Centered Care and what you can achieve by focusing improvements in the **What it is** section.
What is Person-Centered Care?

**Person-Centered Care** organizes a system around the comprehensive needs of people rather than individual diseases. This involves engaging with individuals, their families, and their communities as equal partners in promoting and maintaining their health - including communication, trust, respect for preferences, as well as education and support for participating in health care decisions.

Person-centered Care is a critical component of achieving High-Quality Primary Health Care.
What is Person-Centered Care?

**Why it’s important**

- **Equity**
  To be empowered users of the health system, patients must be educated and supported to make informed decisions and actively participate in their own care.

- **Patient and workforce satisfaction**
  Person-centeredness is an important function for improving system performance from the perspective of the user, catalyzing use of care. Person-centered Care also benefits job satisfaction among the health workforce.

- **Improved health and clinical outcomes**
  Person-centered Care improves health and clinical outcomes and catalyzes more efficient and cost-effective services.
What is Person-Centered Care?

Person-Centered Care involves engaging with people as equal partners in promoting and maintaining their health and assessing their experiences throughout the health system, including communication, trust, respect, and preferences.

Key steps and considerations

- **Empowering and engaging people and communities** through public education and patient engagement, encouraging patients and families to be full participants in care.

- **Strengthening governance and accountability** through policies; leadership, development, and quality improvement training; reporting of standardized patient-centered measures; systematic feedback; and accreditation or certification requirements.

- **Reorienting the model of care** through design and delivery of efficient and effective services that are holistic, comprehensive, and sensitive to social and cultural needs and preferences.

- **Coordinating services within and across sectors** to leverage multisectoral and intersectoral partnerships and the integration of health providers in levels of care.

- **Creating an enabling environment** by bringing all stakeholders together to transform these strategies into an operational reality – including approaches such as incentives to promote supportive care and tools for facilitation of person-centered care.

**Person-Centered Care** involves engaging with people as equal partners in promoting and maintaining their health and assessing their experiences throughout the health system, including communication, trust, respect, and preferences.
HIGH-QUALITY PRIMARY HEALTH CARE IS

Person-Centered

Person-centered care is organized around the comprehensive needs of people rather than individual diseases.

It engages people in full partnership with health care providers in promoting and maintaining their health.

Person-centered care considers a patient's social, career, cultural, and family priorities as important facets of health.
Deeper dive: Key Elements of Person-Centered Care

- **Education and shared knowledge**
  Ensure patients support to make decisions and participate in their own care.

- **Involvement of family and friends**
  In decision-making and awareness and accommodation of their needs as caregivers.

- **Collaboration and team management**
  Leaders collaborate with patients and families in policy and program development, implementation + evaluation; facility design; professional education; and delivery of care.

- **Sensitivity to non medical and spiritual dimensions of care**
  Providers are trained in how to incorporate these key elements of patient identity.

- **Respect for patient needs and preferences**
  Providers see patient and caregivers as the agents in their care decisions.

- **Free flow and accessibility of information**
  Use of practical tools to facilitate communication that supports person-centered care.
Deeper dive: Strategic Framework on Integrated People-Centered Health Services

Person-centered reforms incorporate a rights-based approach to health systems strengthening, placing **health as a human right at the core of the national health strategy**. This approach is vital for the realization of universal access to high-quality primary health care services and making progress toward the Sustainable Development Goals.

The WHO has created this framework of strategic approaches required for developing policies that promote people-centered health systems.

**Vision**

“All people have equal access to quality health services that are co-produced in a way that meets their life course needs and respects social preferences, are coordinated across the continuum of care, and are comprehensive, safe, effective, timely, efficient and acceptable; and all carers are motivated, skilled and operate in a supportive environment.”

**Strategy 1:** Engaging and empowering people & communities

**Strategy 2:** Strengthening governance & accountability

**Strategy 3:** Reorienting the model of care

**Strategy 4:** Coordinating services within and across sectors

**Strategy 5:** Creating an enabling environment

Source: WHO 2016
Person-Centered Care – How do I get started?

Derive information from **what others have done**, **what to ask** and **how to succeed** to help determine where and how you might begin to plan and enact forms in your country context.
Planning for improvement in your context

The guidance and recommendations described within the Person-Centered Care module are not intended to provide a one-size-fits-all solution.

The considerations involved in planning and implementing strategies will depend on your local context.

Sample activities

- **Consider** implementation challenges and approaches in other country contexts
- **Consider how the features of your health system**, such as how decisions get made and the role of the private sector, will impact your improvement plans
- **Identify** key elements that need to be in place to support improvements
- **Use the guiding questions in the Improvement Strategies** to spur thinking about Person-Centered Care in your country context and stimulate ideas for improvement
- **Start to develop** an improvement plan
Planning for improvement in your context

While the specific considerations involved in planning and implementing strategies will depend on your context, you might consider...

- **Factors that impact strengthening governance and accountability:**
  - Policy formulation
  - Performance evaluation + public reporting of standardized patient-centered measures
  - Mutual accountability across stakeholders
  - People-centered incentive systems

- **Factors that impact empowering and engaging people and communities:**
  - Create training opportunities, skills development, and resources for facilitating involvement in health decisions
  - Training and networks for community health workers
Learn from what others have done

Village Women’s Committees | Samoa
Promoting person-centered primary health care through training women in the village to identify at-risk individuals and referring individuals to the health system.

House of Care Program | Scotland
Supporting patients through personalized, prioritized, coordinated care plans that link them to local services and resources.
Samoa: At-a-glance context

East Asia & Pacific

Lower-Middle Income

Conflict-affected and fragile state
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<th>Human Development Index</th>
<th>Life expectancy at birth</th>
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Learn from what others have done: Samoa

Why reforms were needed

• Growing burden of chronic disease
• Hospital-centric model of care delivery

Approach

Since the 1920s, Village Women’s Committees have played an important role in health promotion. Accordingly, the recent Pen Fa’a Samoa initiative adapted the WHO package of NCD interventions to the local Samoan context through women-led, village-health activities to promote person-centered primary health care.

The initiative trains women in the village to measure key NCD metrics, to detect at-risk individuals, counsel and raise awareness about NCDs, and refer individuals to the health system.
Learn from what others have done: Samoa

- **Promotes coordination of care** across the health system through cross-disciplinary outreach teams who follow up with at-risk individuals with a personalized management plan, risk factor consultation, or both.

- **Promotes person-centered design** through adaptation to the Samoan context and designating local facilitators in each village.

- **Connects coordination and person-centered design** linking local village facilitators with cross-disciplinary outreach teams.
Learn from what others have done: Samoa

- **Person-centered governance**: village governance committees of 30-100 individuals ranging in age from 16-60+ years, youth representatives, women-only committee, and women’s committee health promoters.

- **Monitoring and evaluation**: through established performance indicators and standard measurement tools.

- **Cross-disciplinary outreach teams**: such as maternal and child growth monitoring to screen for malnutrition and provide feeding counselling in addition to providing support for adults for NCD management.
Scotland: At-a-glance context

- Europe & Central Asia
  - United Kingdom
- High-Income
- English-speaking country
# Scotland: At-a-glance context

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<tr>
<td>--</td>
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<td>66.5M</td>
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Learn from what others have done: Scotland

Why reforms were needed

- Increasing chronic health conditions and multi-morbidities, fragmented care through a silo-based approach to treatment
- Patients reported low rates of health literacy, sense of agency, and perceived support from medical professionals
- High rates of care staff burnout

Approach

Scotland’s House of Care program uses an integrated model of health to improve person-centered primary health care services. This support combines community and social support to empower patients to be well-informed and equal partners in promoting and maintaining their own health.

At the core of the House of Care is an individual’s personalized, coordinated care plan. Through a series of screenings and consultations, a patient’s care plan is jointly developed and health professional teams help link patients to local services and resources.

Clear two-way information pathways support care team collaborations and patient engagement.
Learn from what others have done: Scotland

**Strengths**

- **Promotes coordination of care** across the health system through cross-disciplinary outreach teams who follow up with at-risk individuals.

- **Promotes person-centered design** through shared decision-making around goal setting, fostering patient agency in their health.

- **Holistic approach to health** that facilitates conversations about psychosocial aspects of individual’s lives and considers the important role of the patient’s wider community in their wellbeing.
Learn from what others have done: Scotland

- **Co-production model** that promotes shared goal setting
- **Training for health professionals** in long-term support and planning
- **Systematic processes** for planning and **clear information pathways** for both patients and providers to strengthen the interoperability of information systems
- **Community services and support** through linkages to patients, providing resources that promote health, wellbeing, and equal partnership in care
What elements should be in place to support effective improvements in Person-Centered Care?

Consider your country context and **what other elements of the Framework should be in place** or pursued simultaneously to support effective improvements in Person-Centered Care.
What elements should be in place to support effective improvements in Person-Centered Care?

Governance is strengthened by a participatory approach to policy formulation, which supports a shared value and vision of people-centered health services for all stakeholders.
What elements should be in place to support effective improvements in Person-Centered Care?

Strong accountability mechanisms and quality management infrastructure (including performance measurement systems incentivizing person-centered care) should be in place to promote the realization of person-centered reforms.
Local priority setting is important to tailor health services to meet the needs and demands of people in communities.

What elements should be in place to support effective improvements in Person-Centered Care?
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Local Priority setting and community engagement should be accompanied by opportunities to hold stakeholders accountable to deliver person-centered care.
What elements should be in place to support effective improvements in Person-Centered Care?

Person-centered health systems acknowledge patients as partners in their own care and support trusting patient-provider relationships that take into account social and cultural attitudes, beliefs, and concerns.
Local priority setting must leverage community engagement strategies to empower, support, and encourage patients to be well-informed and equal partners in their own health.
Unified leadership commitment is critical to deliver person-centered services and communicate this vision to every member of the facility. Managers should be properly equipped with the tools, systems, and skills to productively assess and support the health workforce to provide person-centered care.
Questions to ask to help you get started

The specific considerations involved in planning and implementing strategies will depend on your local context.

The questions listed may be a useful starting place to determine how you might begin to plan and enact reforms in your context.

What should be considered to begin improvements?

- What systems or processes are in place to ensure that patients are empowered in their care and engaged in the planning of their health systems?
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**What should be considered to begin improvements?**

- What systems or processes are in place to ensure that patients are empowered in their care and engaged in the planning of their health systems?

- Are data collected on patient-perceptions of care? If they are, how are they used?
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- What trainings should providers and managers receive in person-centered care?
Recap: Person-centered Care

System
- Governance & Leadership
  - Primary Health Care Policies
  - Quality Management Infrastructure
  - Social Accountability

Health Financing
- Payment Systems
- Spending on Primary Health Care
- Financial Coverage

Adjustment to Population Health Needs
- Surveillance
- Priority Setting
- Innovation & Learning

Inputs
- Drugs & Supplies
- Facility Infrastructure
- Information Systems
- Workforce
- Funds

Service Delivery
- Population Health Management
  - Local Priority Setting
  - Community Engagement
  - Empowerment
  - Proactive Population Outreach
- Facility Organization & Management
  - Team-based Care Organization
  - Facility Management Capability & Leadership
  - Information Systems Use
  - Performance Measurement & Management Outreach
- Access
  - Financial
  - Geographic
  - Timeliness
- High Quality Primary Health Care
  - First Contact
  - Accessibility
  - Continuity
  - Comprehensiveness
  - Coordination

Outputs
- Effective Service Coverage
  - Health Status
  - Coverage
  - Responsiveness to People
  - Equity
  - Efficiency
  - Resilience of Health Systems

Social Determinants & Context (Political, Social, Demographic & Socioeconomic)
Recap: Person-centered Care

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