



The patient centered approach and the quadruple aim:

1. Patient experience
2. Health outcomes
3. Cost-benefit ratios
4. Professional work satisfaction

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Professor UiT – The arctic university of Norway

Africa Health, Johannesburg South Africa, 28th of May 2019





People centeredness
is the alfa and omega
of health care

World Health Organization - WHO



“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

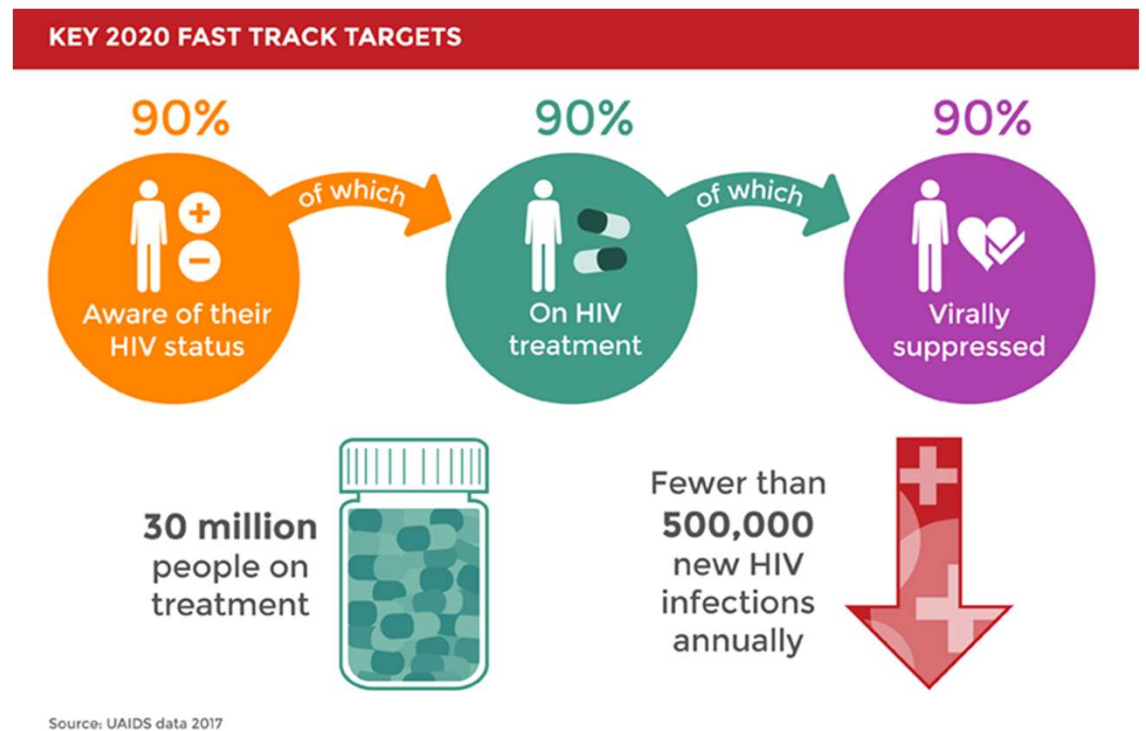
WHO 1948

“Health is, therefore, seen as a resource for everyday life, not the objective of living.”

Ottawa charter
WHO 1986

Success story after success story

- Cures
- Long-term treatment
- Prevention



Source: UNAIDS data 2017

Avert www.avert.org

Example: The Anti-Retro-Viral Treatment for HIV

Yet, some voices are repeatedly called for something else...



We are not listening to: Patients needs values and preferences

Engel => Bio-psycho-social medicine

Mead => Patient-centeredness

Wagner => Informed active patient

Ruben => Goal Oriented care

Bisognano => What matters to you?

Cassel on Suffering

- Suffering is individual and personal
- Who am I, when what I do, love, cherish, is threatened by poor health?

“Physicians' failure to understand the nature of suffering can result in medical intervention that (though technically adequate) not only fails to relieve suffering but becomes a source of suffering itself.»

Cassel - N Engl J Med. 1982.; 306:639-45



What matters to you?

- A global movement
- Not a method – a concept
- With empathy and sensitivity to try to truly understand
- And stay loyal to
- What matters



Reuben D. B. and Tinetti M. E. (2012). "Goal-Oriented Patient Care — An Alternative Health Outcomes Paradigm." New England Journal of Medicine **366**(9): 777-779.

What matters?

- Our biology
- And...
- Our pragmatic, rational, goal-oriented selves
- Our playful, life embracing and nurturing selves...
- The concepts and ideas bigger than ourselves



Van Hooft, S. (1997). "Health and subjectivity." *Health*: 1(1): 23-36.

**But, all health professionals
have their patients wellbeing at
the center of their focus...**

**So – now patients are the
experts?**

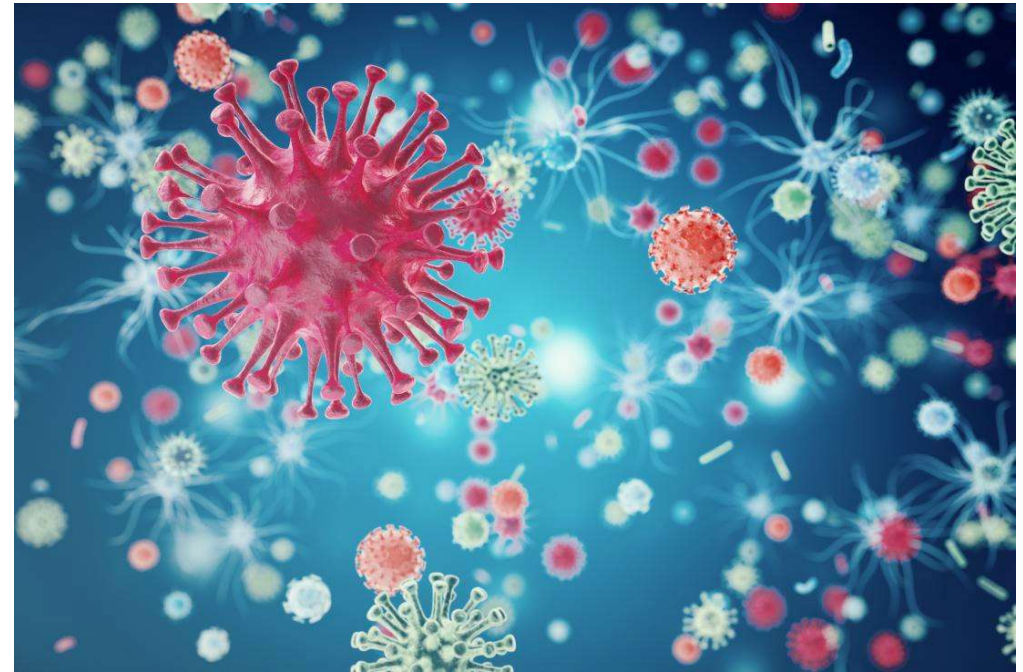
**My patients want me to help
them decide...**



The story of Robert

- Lives in a Sub-saharan country
- He is HIV positive
- He has dropped out of his ART program
- ART is a life long treatment

- Up to 1/3 of HIV patients are lost to follow-up
- A clinical Tracker – links him to a researcher
- Why did Robert drop out?



Chi BH, Yiannoutsos CT, Westfall AO, Newman JE, Zhou J, Cesar C, et al. Universal definition of loss to follow-up in HIV treatment programs: a statistical analysis of 111 facilities in Africa, Asia, and Latin America. 2011;8(10):e1001111.

- *We fail to get vehicles sometimes. And when you go to look for money for [a motorcycle taxi] you find you do not have it.*
- *So when you miss your appointment and go to clinic on another day, [the provider] starts quarreling with you about not having come on the appointed day.*
- *And when you tell that person you got problems, he tells you, “You should spend the night on the road.”*
- *How can I spend the night on the road? Here I am, having failed to get money for taking me to the hospital and then I'm supposed to get money to spend the night somewhere and feed myself? These are some of the problems I have in going to the clinic.*

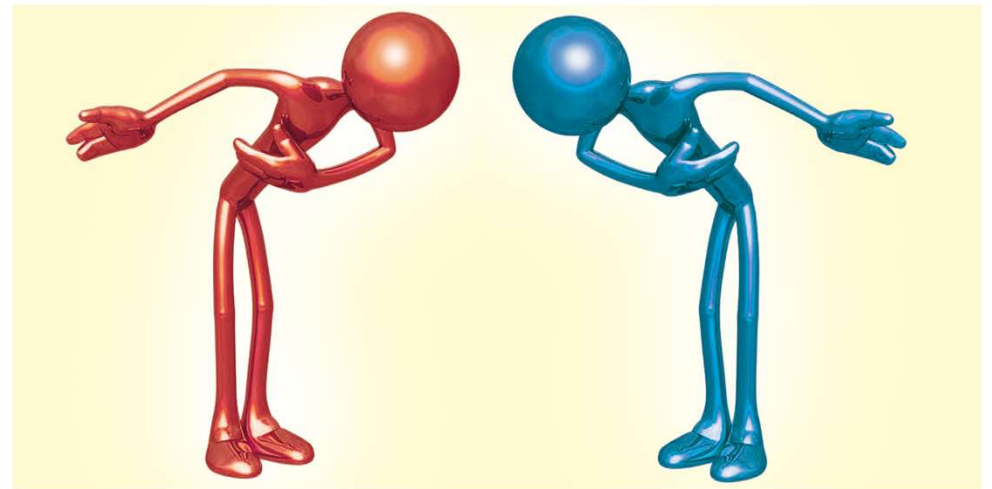


Ware NC, Wyatt MA, Geng EH, Kaaya SF, Agbaji OO, Muyindike WR, et al. Toward an understanding of disengagement from HIV treatment and care in Sub-Saharan Africa: a qualitative study. 2013;10(1):e1001369.

Respect

- ... *“Why did you stop coming to the clinic...despite what happened, you should have come back to the clinic and met other people.”*
- *I told her no, I didn't want to show up because what happened to me [at the clinic] was still in my heart.*
- *If I was treated nicely the situation would have been different; since I was treated badly I saw the*

treatment was meaningless.
Ware NC, Wyatt MA, Geng EH, Kaaya SF, Agbaji OO, Muyindike WR, et al. Toward an understanding of disengagement from HIV treatment and care in sub-Saharan Africa: a qualitative study. 2013;10(1):e1001369.



What is of value?



Survival



A healthy child



Travel?
Grand children? Sex?

Autonomy? Dignity?

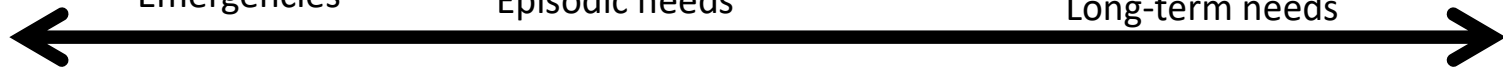
ACT on

Emergencies

Episodic needs

ACT - with

Long-term needs



Populations are getting older



Percentage aged
60 years or older:

- 30% or more
- 10 to <30%
- <10%

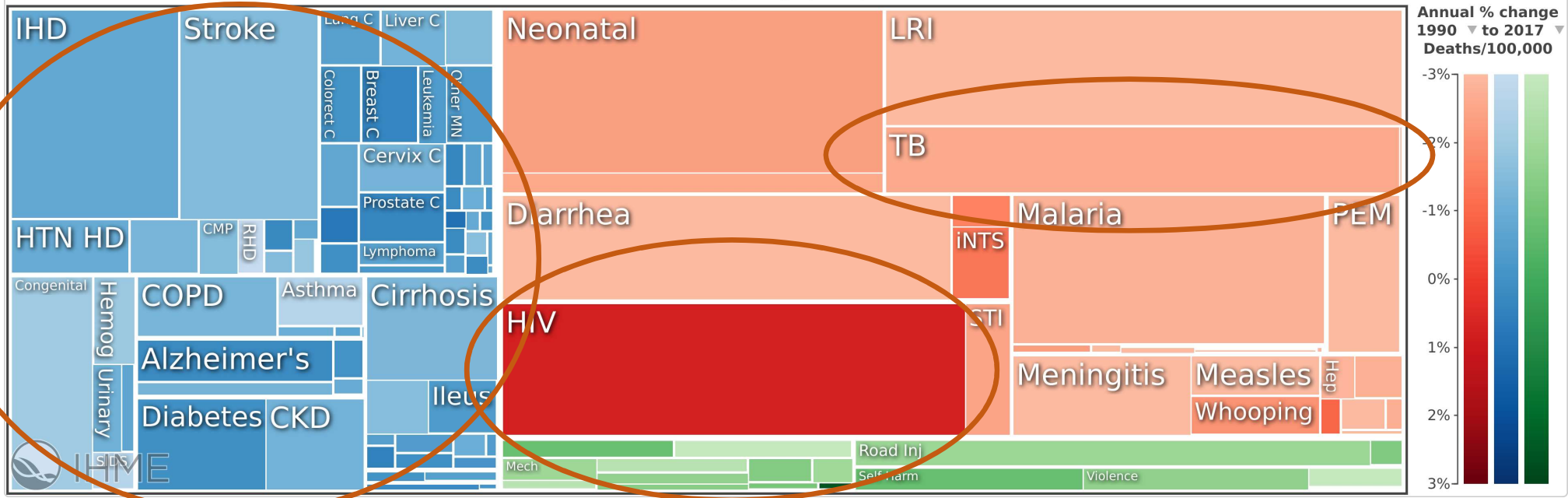
2015

Public health measures are successful! We are growing older all over the globe.

Group II - Non communicable disease (NCD)

Group I - Communicable, maternal, nutrition

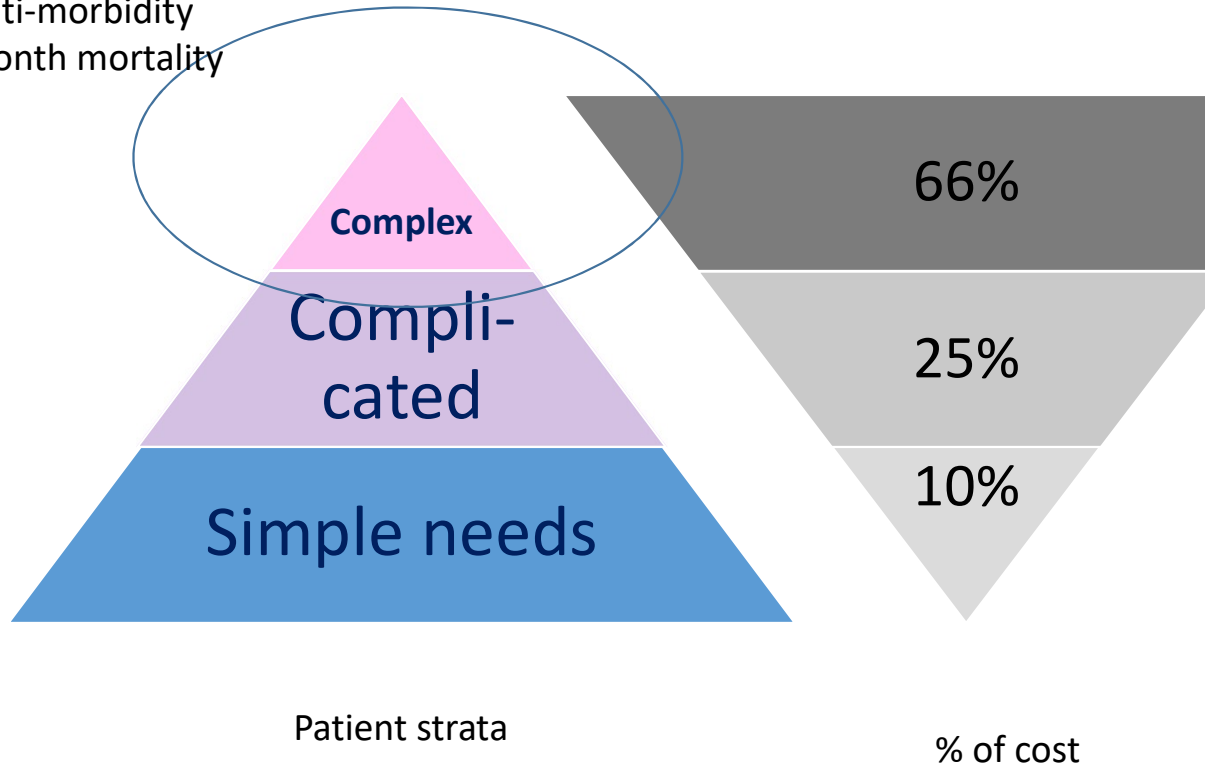
Sub-Saharan Africa - WB
Both sexes, All ages, 2017, Deaths



Group III - Accidents and injuries

10% top spenders:

- 91 % - chronic conditions
- 70% - multi-morbidity
- 13% - 6month mortality



Wang L, Si L, Cocker F, Palmer AJ, Sanderson K. A Systematic Review of Cost-of-Illness Studies of Multimorbidity. Applied health economics and health policy. 2017:1-15. PMID: 28856585. doi: 10.1007/s40258-017-0346-6.



Sustainability...

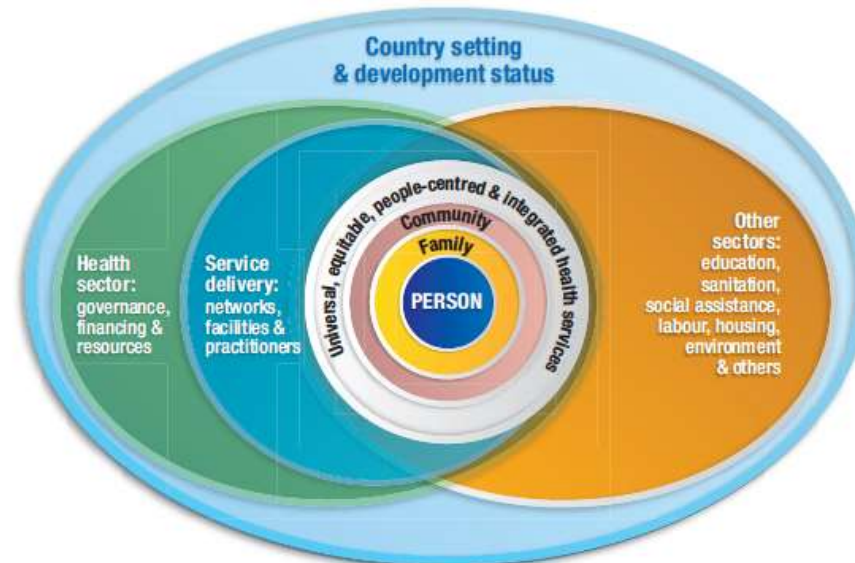


How to create value in longterm patient pathways?

WHO – Integrated people-centered care



Figure. Conceptual framework for integrated people-centred health services



WHO. WHO global strategy on integrated people-centred health services 2016-2026. Executive Summary. Placing people and communities at the centre of health services. World Health Organization: 2015.

What are the effective elements in patient-centered and multimorbidity care? A scoping review

Marie-Eve Poitras^{1*} , Marie-Eve Maltais², Louisa Bestard-Denommé³, Moira Stewart³ and Martin Fortin²

- 1) Supporting decision process and evidence-based practice;
- 2) Providing patient-centered approaches;
- 3) Supporting patient self-management;
- 4) Providing case/care management;
- 5) Enhancing interdisciplinary team approach;
- 6) Developing training for healthcare providers;
- 7) Integrating information technology.

Digital health

- “...digital technologies to improve health”
- by improving the **accessibility, quality and affordability of health services;**



WHO (2019). WHO Global Strategy on Digital Health 2020-2024.



WHO (2015). WHO global strategy on integrated people-centred health services 2016-2026. Executive Summary.



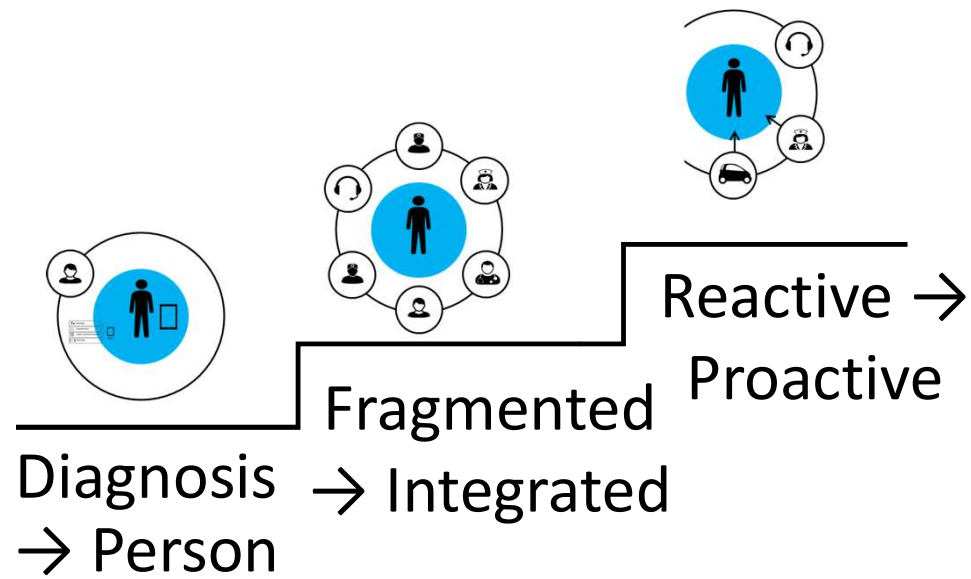
How do we redesign
care for the
quadruple aim?

Vision:

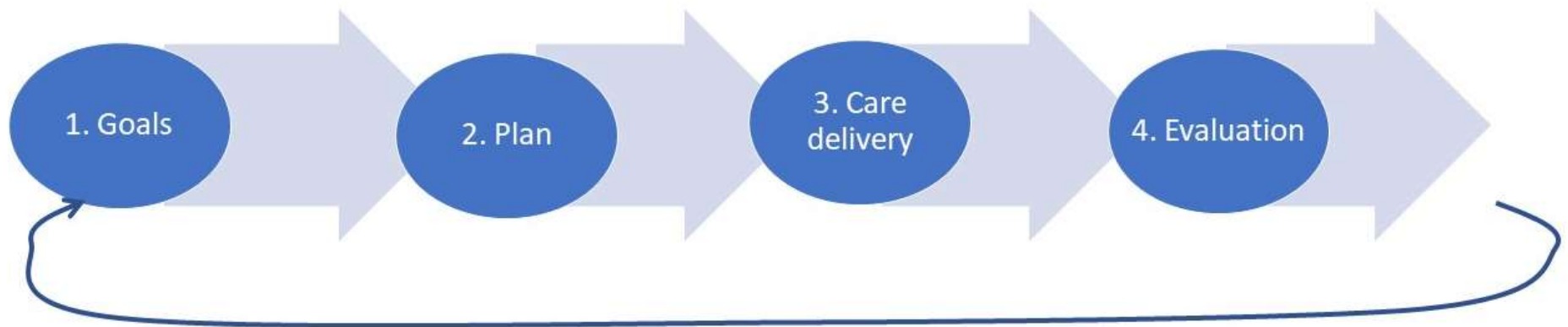
A digitally supported person-centered, integrated and proactive care pathway



A paradigm shift

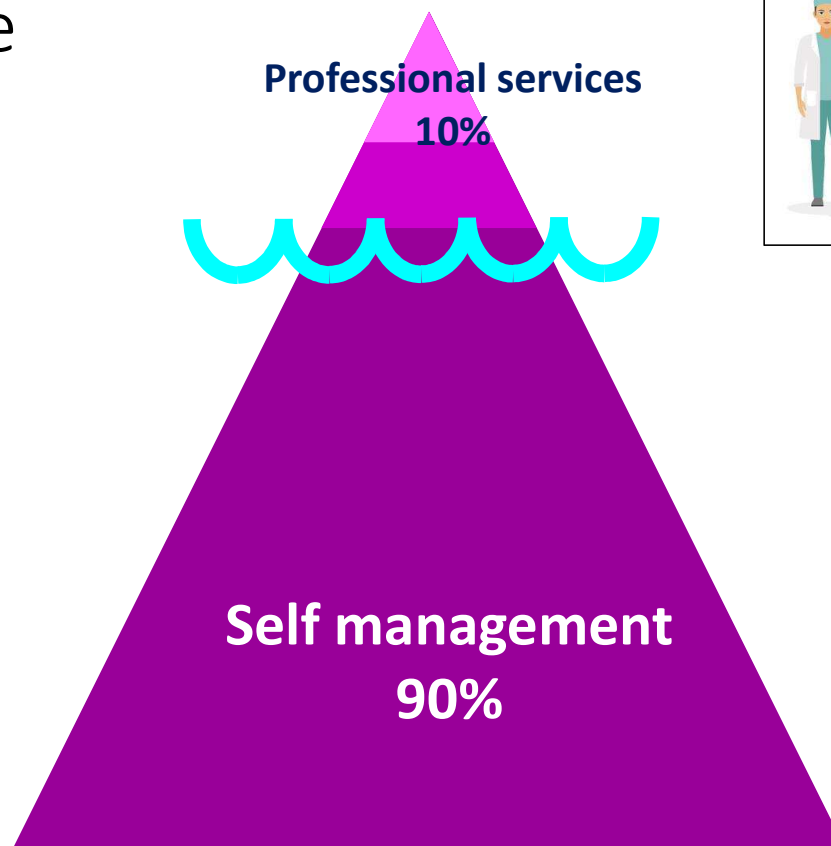


A patient pathway is only as strong as its weakest link



Berntsen GR, Høyem A, Lettrem I, Ruland C, Rumpsfeld M, Gammon DB. A person-centered integrated care quality framework. A qualitative study of patients' evaluation of care in light of chronic care ideals. BMC Health services research 2018(18).

The agents of care





Person-centered:

Health is a resource for life,
not a goal in itself.
Health services is a support for
health in my life



Integrated:

The whole person pathway
ensures that the right care is
available at their right time
across professions and
organizations.

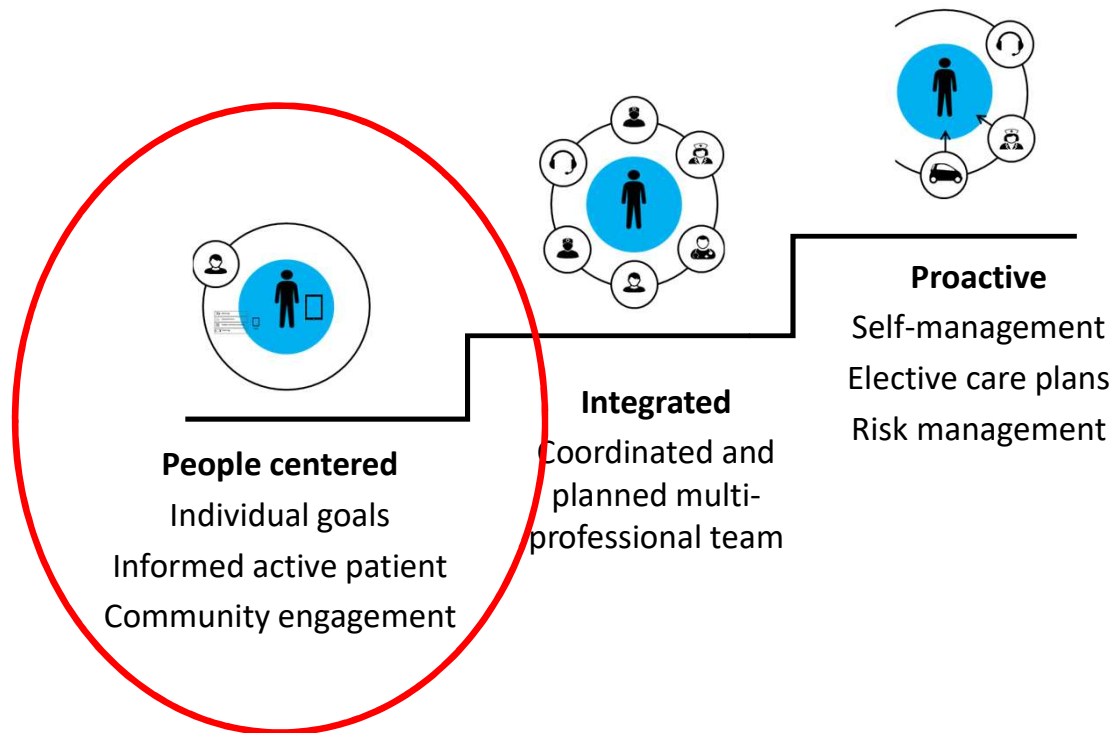
3 P modellen: Pasienter og profesjonelle i partnerskap



Proactive:

Care which builds on evidence
based practice, and seeks to
avoid costly crises in both
human and economic terms.

Three active ingredients



People centered



• What matters to you?

• Cocreation of goals

• Care plan meets goals

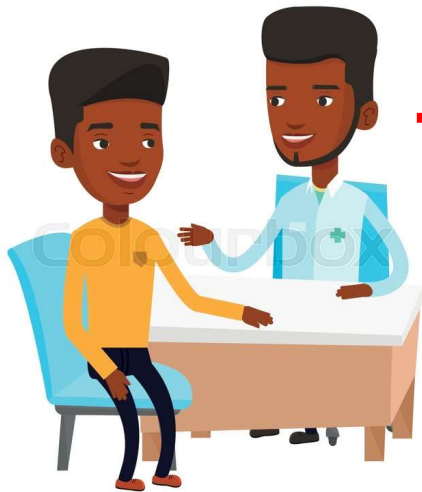
• Patient evaluation of goals

Person-centered

- Not the patient in focus
- **The patient's focus**
- What matters to you?
 - Goals
 - Plan
 - Care delivery
 - Evaluation



Shared power – Shared decision making – Shared goals



- Understand my health issues
- Share what matters to me
- Use what matters in choosing what to do next?



Elwyn G, Barr PJ, Grande SW, Thompson R, Walsh T, Ozanne EM. Developing CollaboRATE: A fast and frugal patient-reported measure of shared decision making in clinical encounters. *Patient Education and Counseling* [Internet]. 2013 Accessed; 93(1):[102-7 pp.]. Available from: <http://www.sciencedirect.com/science/article/pii/S0738399113002097>.

Effects on outcomes

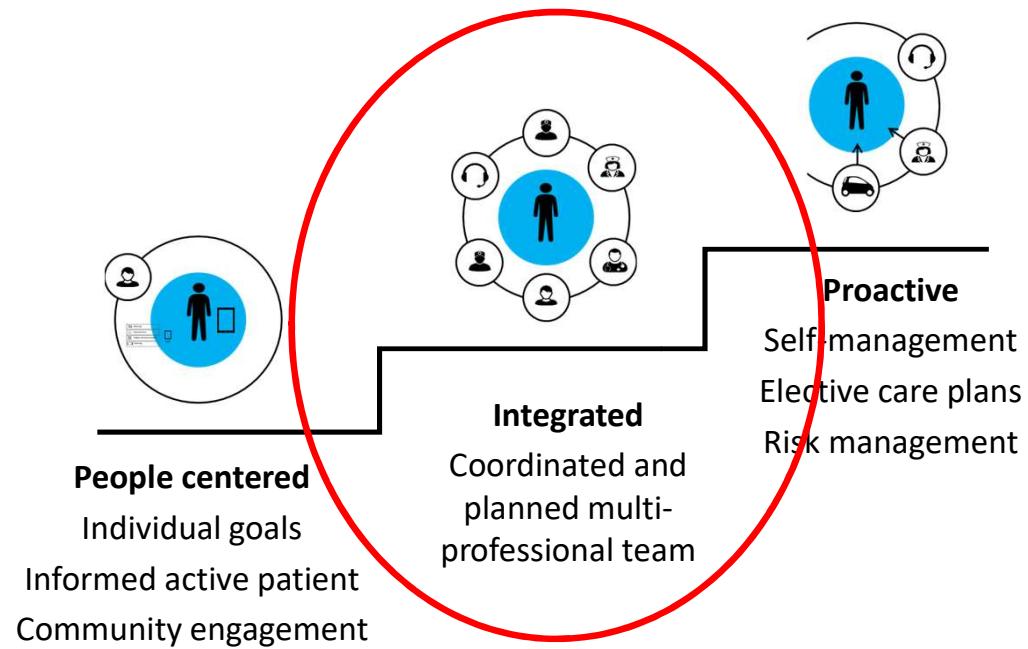


Personalized care planning:

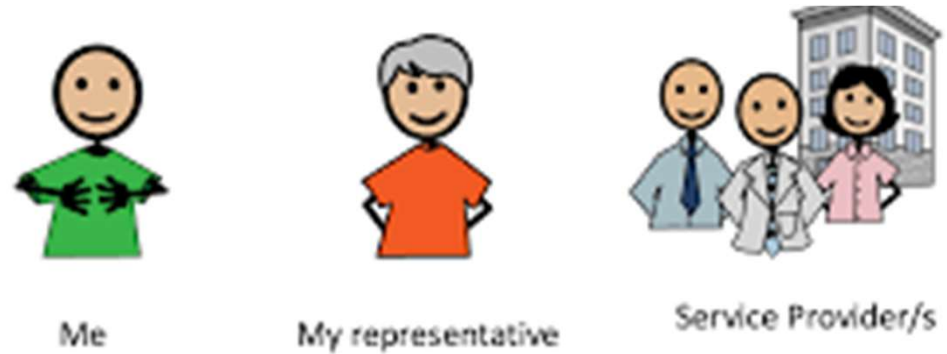
«...offers the potential to provide effective help to patients, leading to better health outcomes.»

Coulter A, Entwistle Vikki A, Eccles A, Ryan S, Shepperd S, Perera R. Personalised care planning for adults with chronic or long-term health conditions. Cochrane Database of Systematic Reviews. 2015 (3). PMID: 25733495. doi: 10.1002/14651858.CD010523.pub2.

Three active ingredients



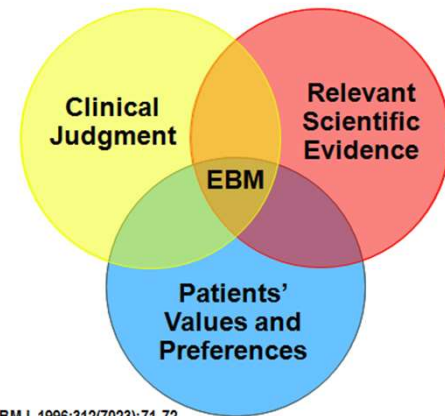
Involve the team – the necessary expertise



The team expertise

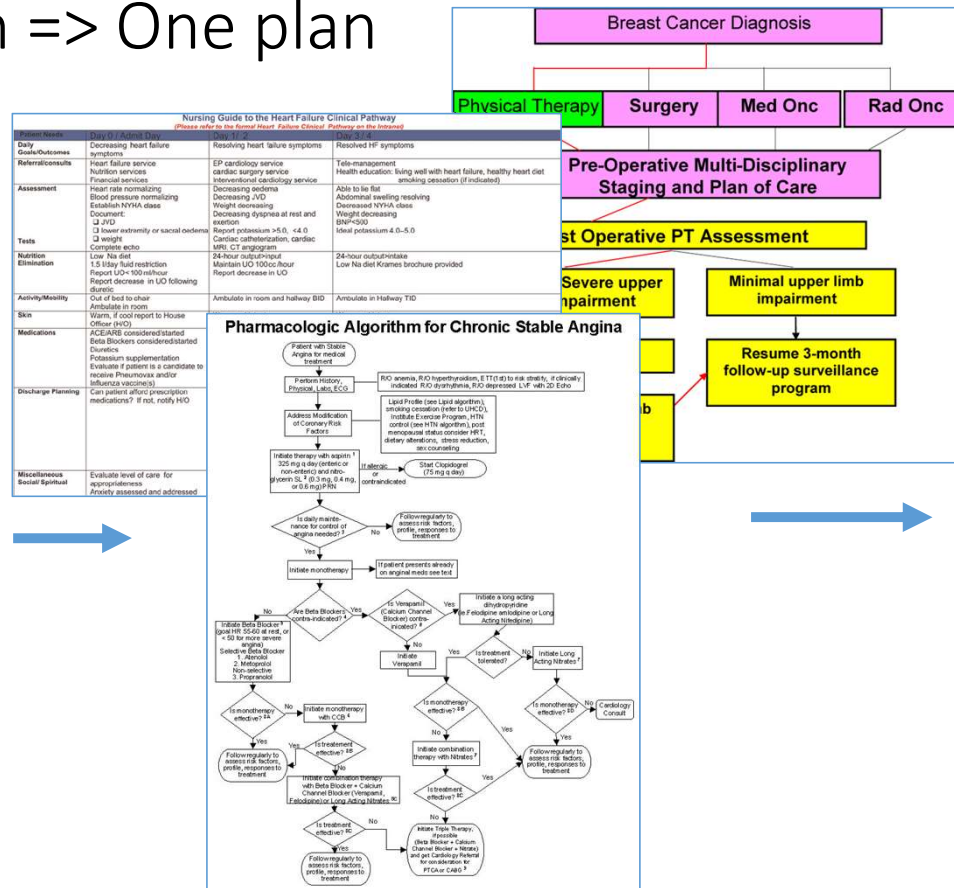


What Is Evidence-Based Medicine?

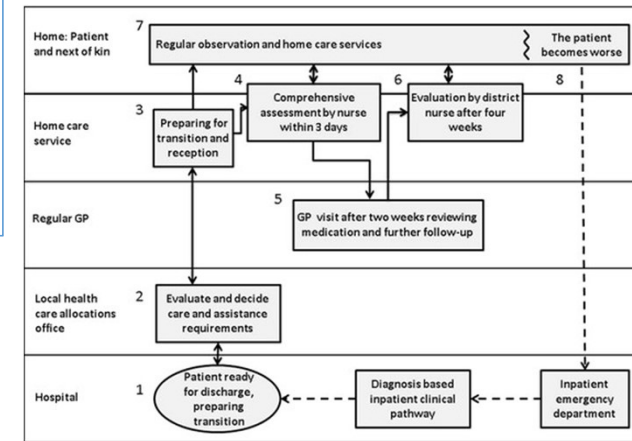


Sackett DL, et al. BMJ. 1996;312(7023):71-72.

One Person => One plan

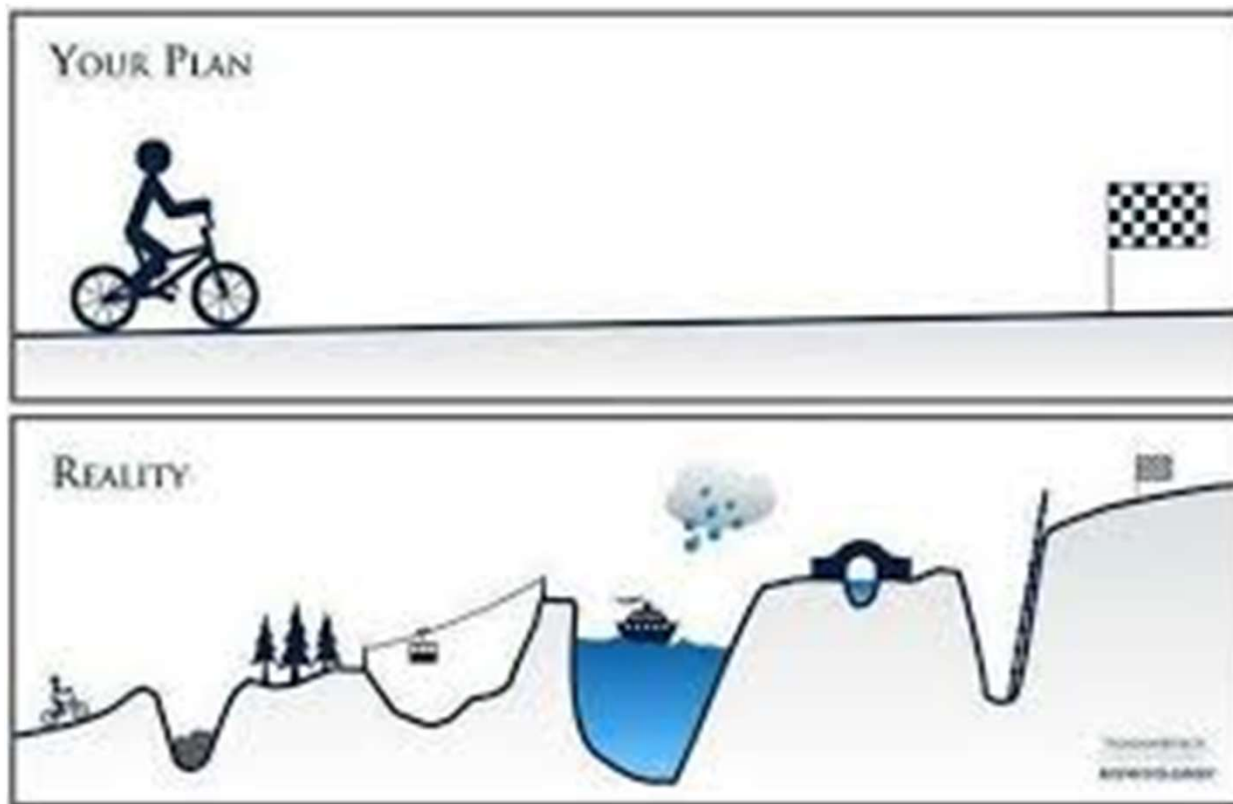


- Breast Cancer
- Heart failure
- Chronic Angina

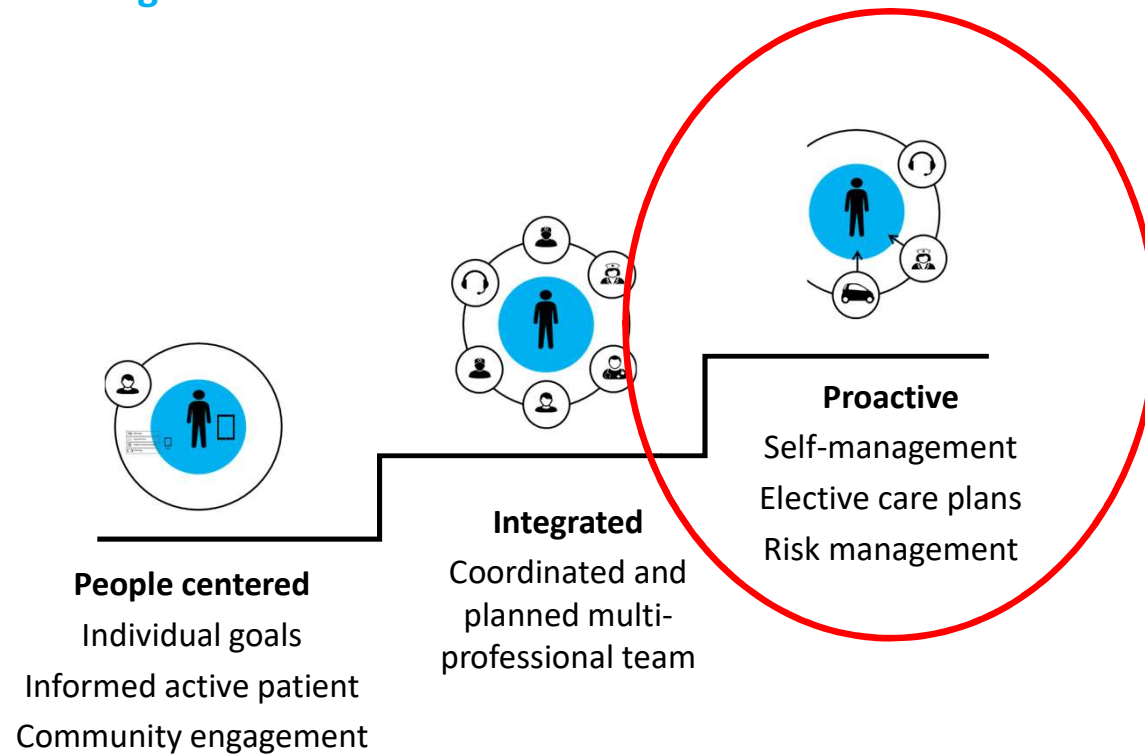


One Shared Plan

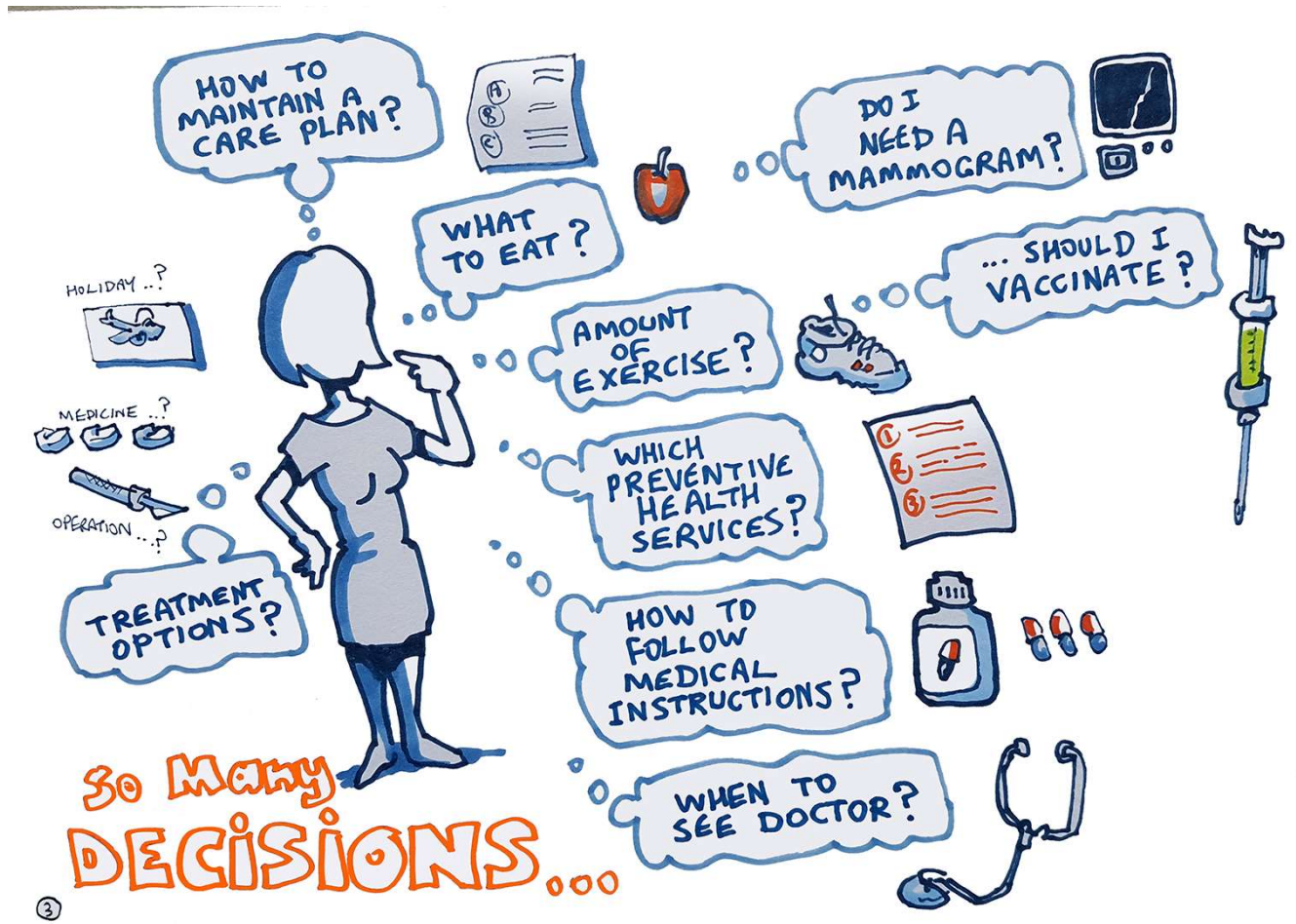
Delivery according to plan



Three active ingredients



Health Literacy
Supports
Self-management





Find the right services and doctors



Manage their own chronic health conditions



Get to the places and appointments they need



Take medicine the right way



Fill out health forms and access their online My Health Record



Share their medical history with their health care team



Keep up a healthy lifestyle



Follow advice about how to look after their own health

patients with low
HEALTH LITERACY...



Are more likely to visit an
EMERGENCY ROOM



Have more
HOSPITAL STAYS



Are less likely to follow
TREATMENT PLANS



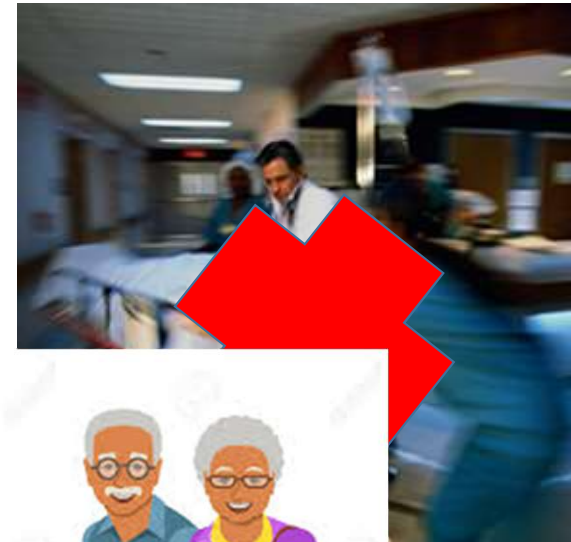
Have higher
MORTALITY RATES

www.cdc.gov/phpr





Risk monitoring

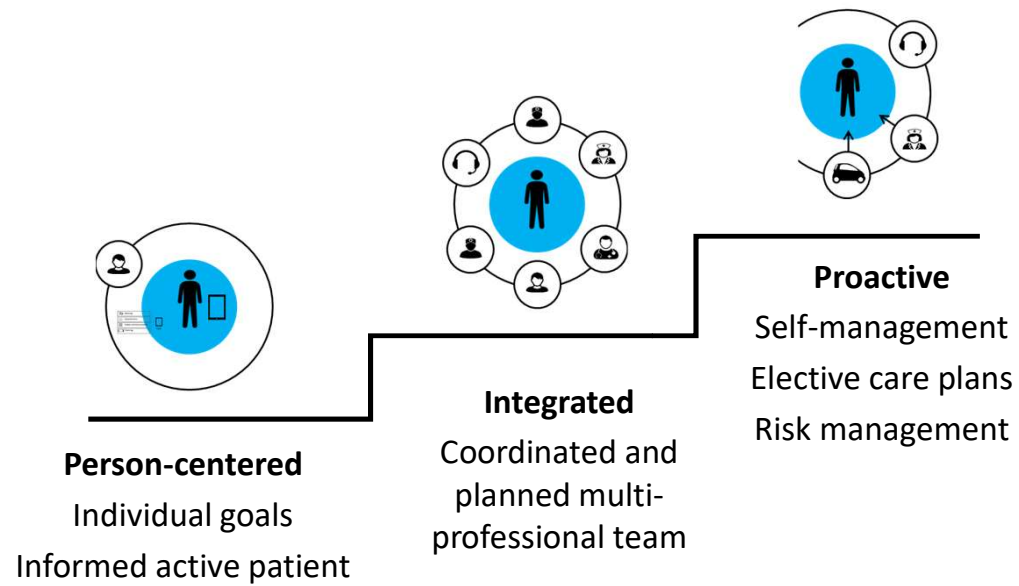


Emergency Plan

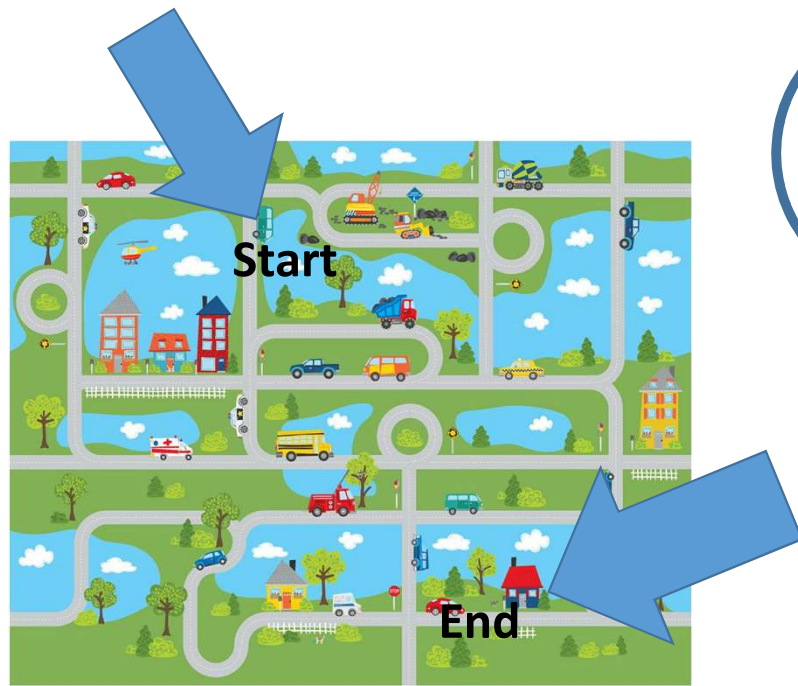
Patient evaluation - did we meet my goals?



**The Quadruple Aim –
All the active ingredients – all the time**

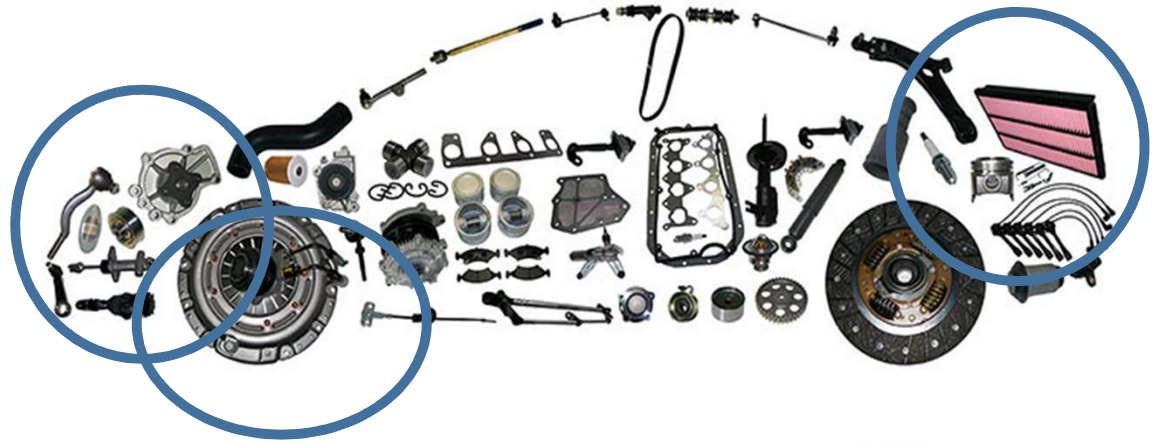


A patient pathway view



Goal

One person => one plan



Preventative Maintenance Starts Here!



Proactive



Success!

The Quadruple Aim

- Are care goals meaningful to the patient?
 - Do care plans meet patient defined goals?
 - Are all diagnosis plans merged into one person plan?
 - Are we managing risks?
 - Is care delivered as planned?
 - Did we reach the goals we set?
 - Are we learning from the goal evaluation?
- Diagram illustrating the Quadruple Aim with associated goals:
- Patient experience** (includes: Are care goals meaningful to the patient?; Do care plans meet patient defined goals?)
 - Health outcomes** (includes: Are all diagnosis plans merged into one person plan?; Are we managing risks?)
 - Cost benefit ratios** (includes: Is care delivered as planned?)
 - Health professional job satisfaction** (includes: Did we reach the goals we set?; Are we learning from the goal evaluation?)

Thank you for your attention

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