



SamueliInstitute.org



Relationship-Centered Primary Care:

From Peril to Prosperity

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Lehigh Valley Health Network

Samueli Institute's *Patients at the Crossroads* Symposium
Alexandria, Virginia – 11/8/12



NO Conflicts of Interest

At the end of this activity, the learner will be able to:

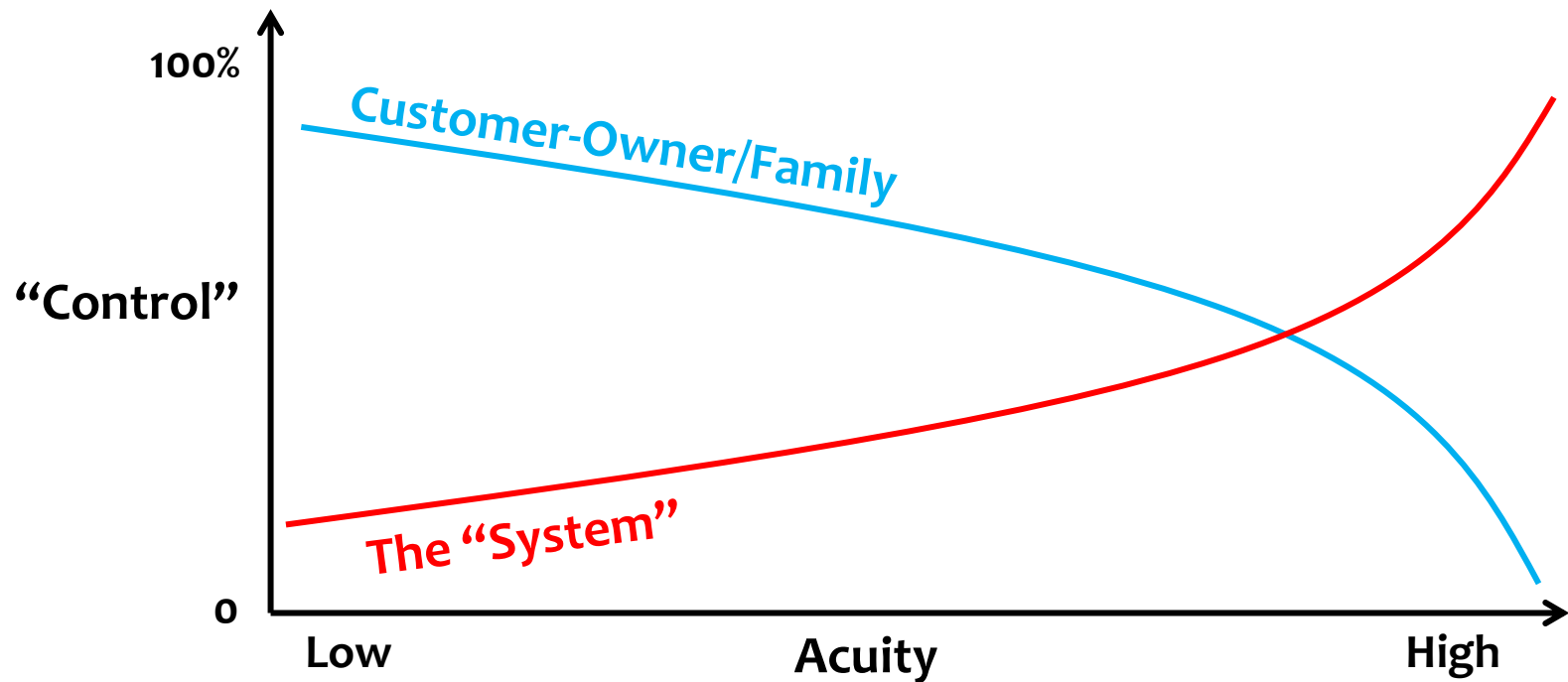
- Explain meanings of patient-centered, evidence, integrated care, & primary care.
- Compare & contrast 4 different kinds of patient-centered medical homes.
- Outline at least 4 key principles for creating better integrated, evidence-informed, relationship-centered primary care.



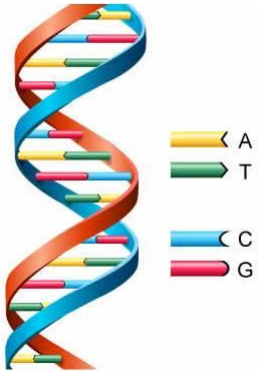
Patient-Centered?



Who really makes the decisions?

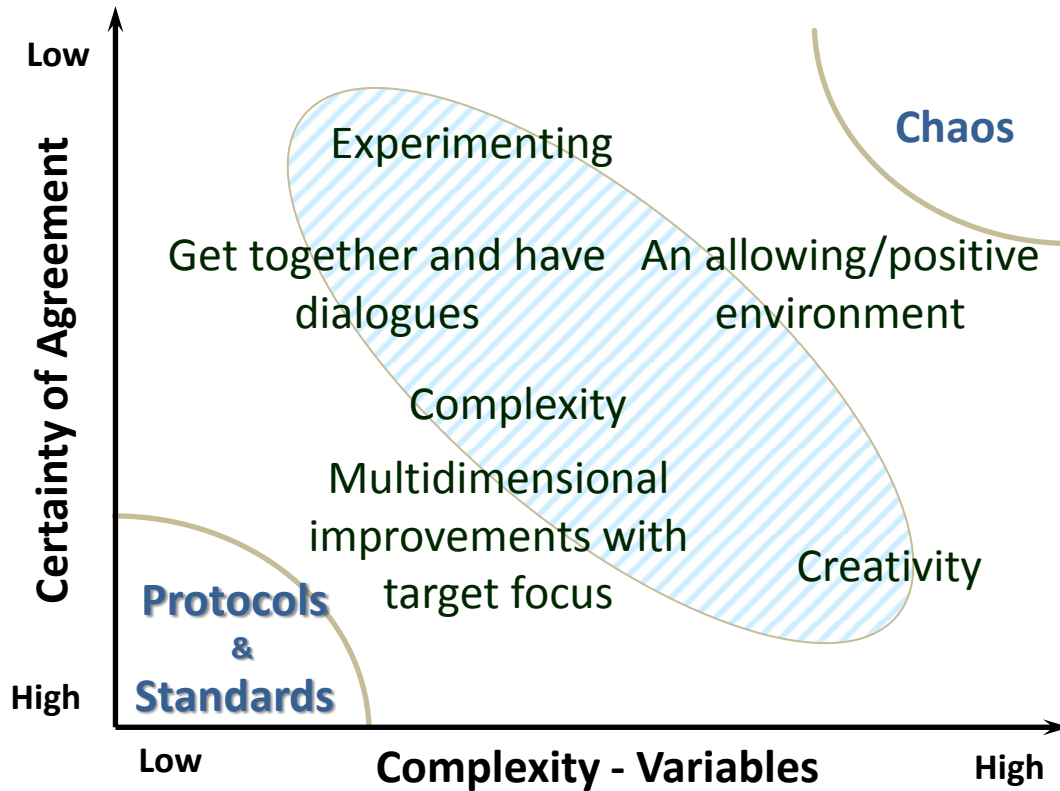


Evidence-Based?

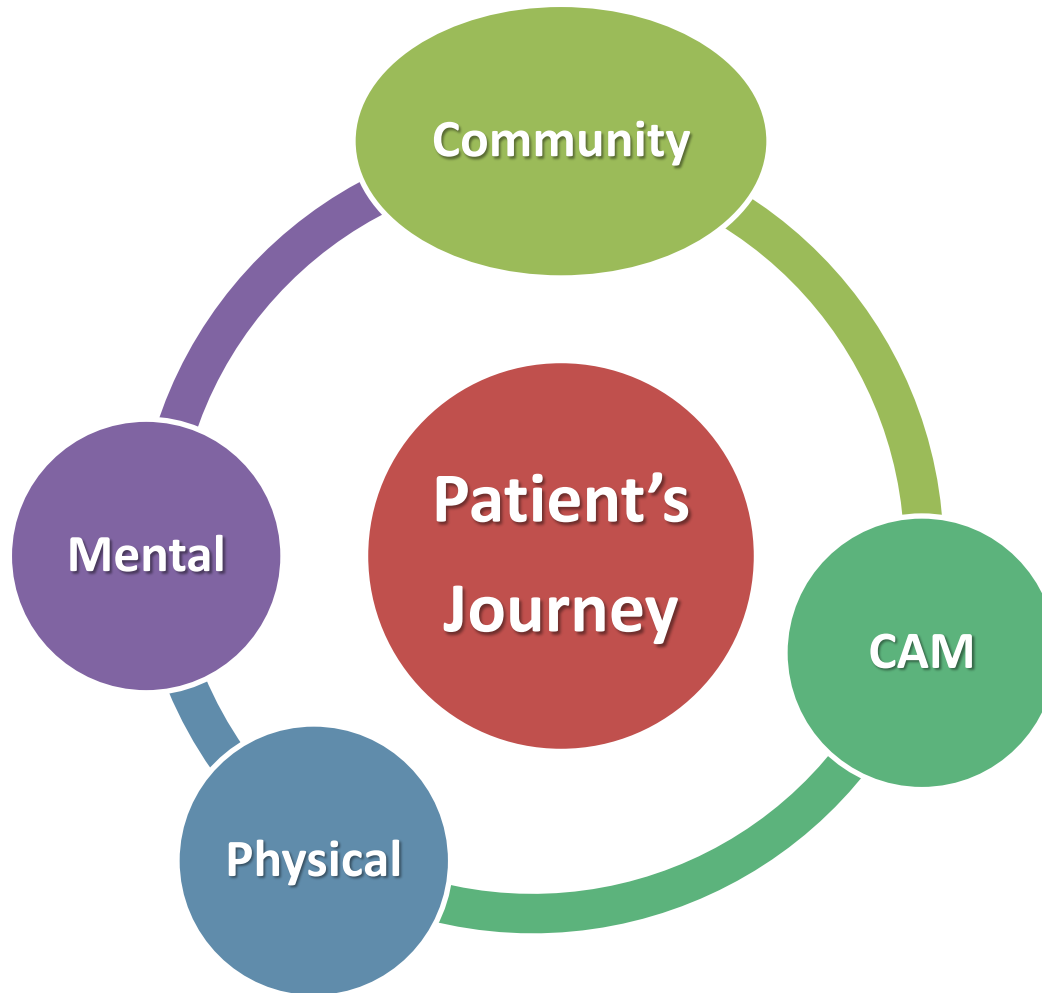


Some simple rules for improvement

Complexity of Illness Graph

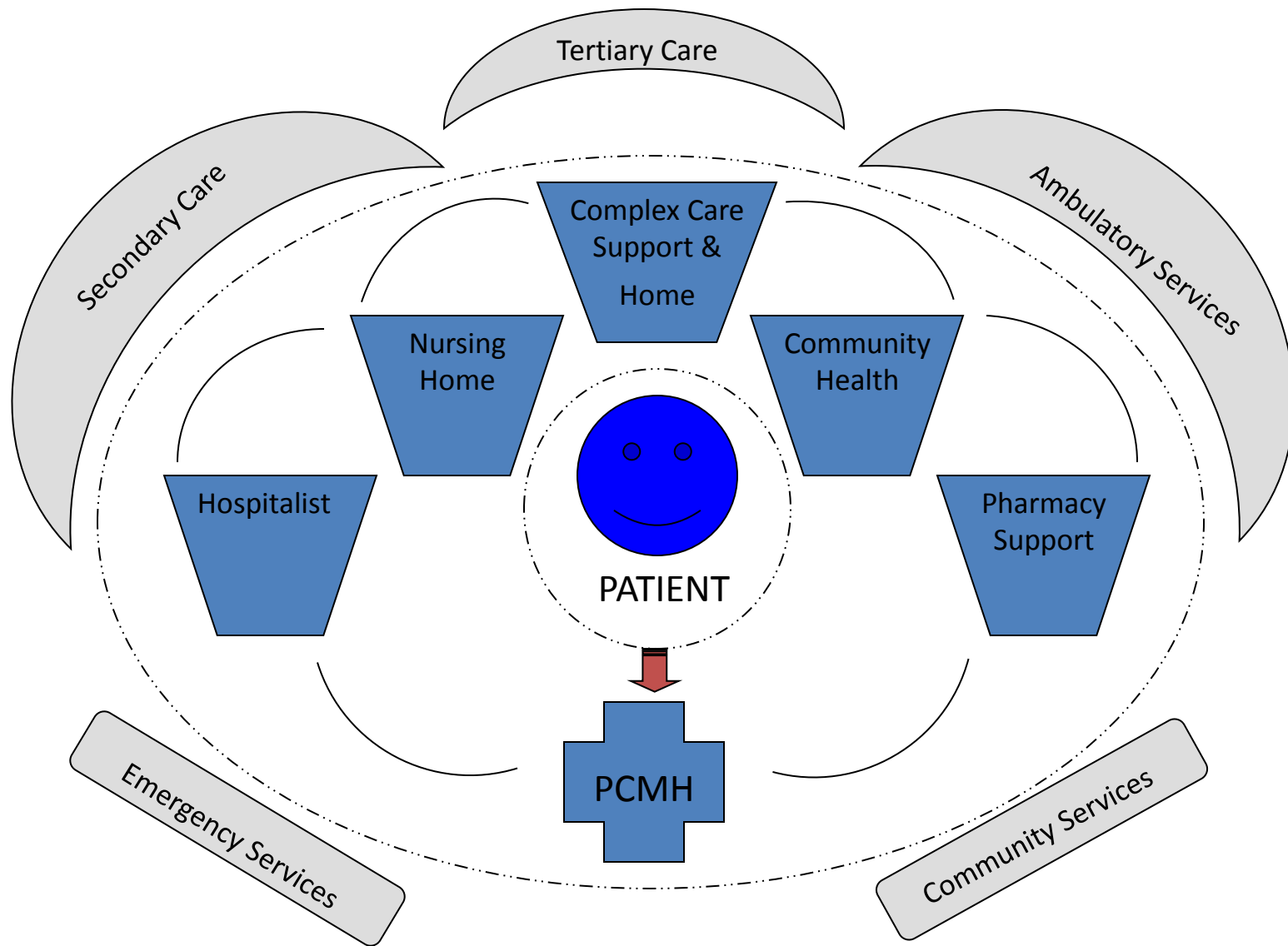


Integrated?



Primary Care?





The Primary Care "SCOPE" Restored 2012

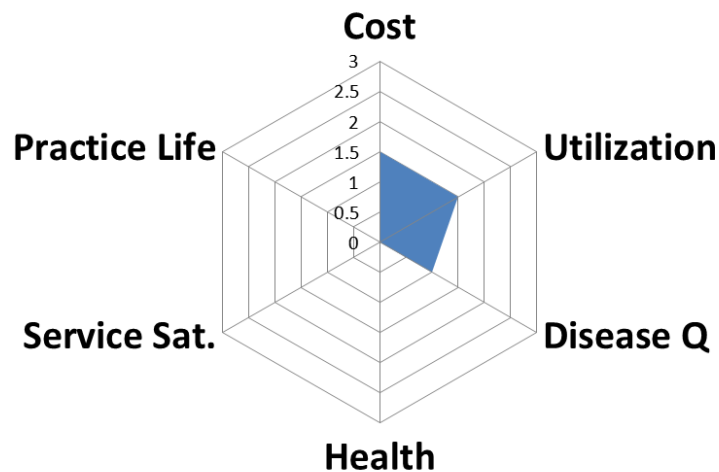
PCMH?



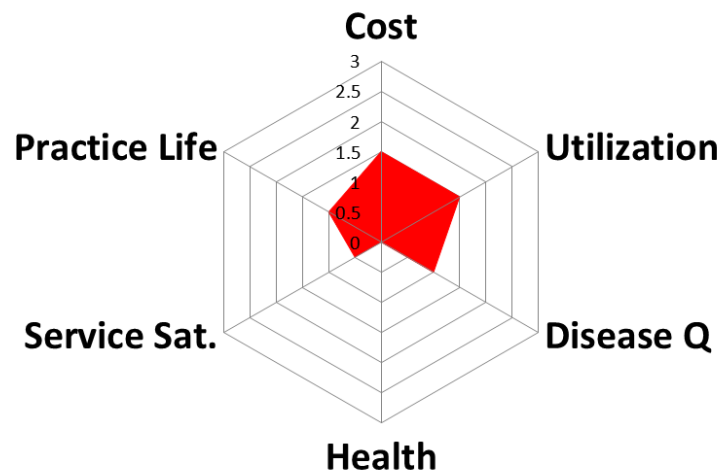
Rejuvenate your home
RENOVATIONS & ADDITIONS



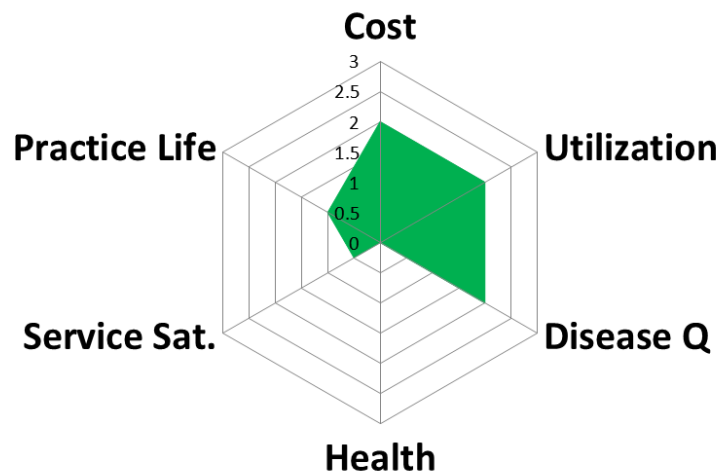
Add-On PCMH



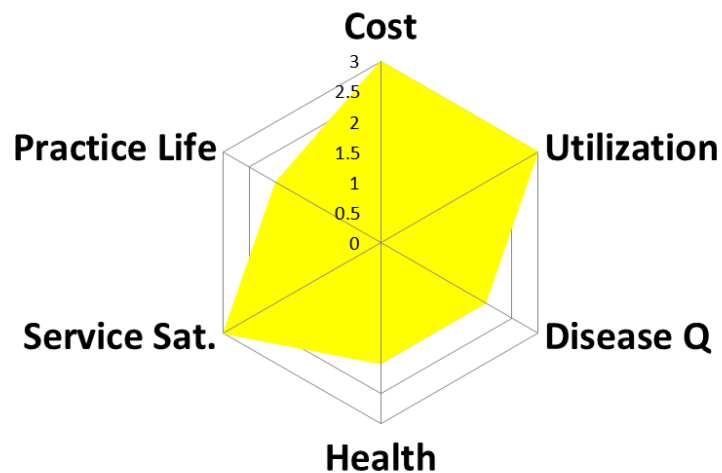
Renovated PCMH



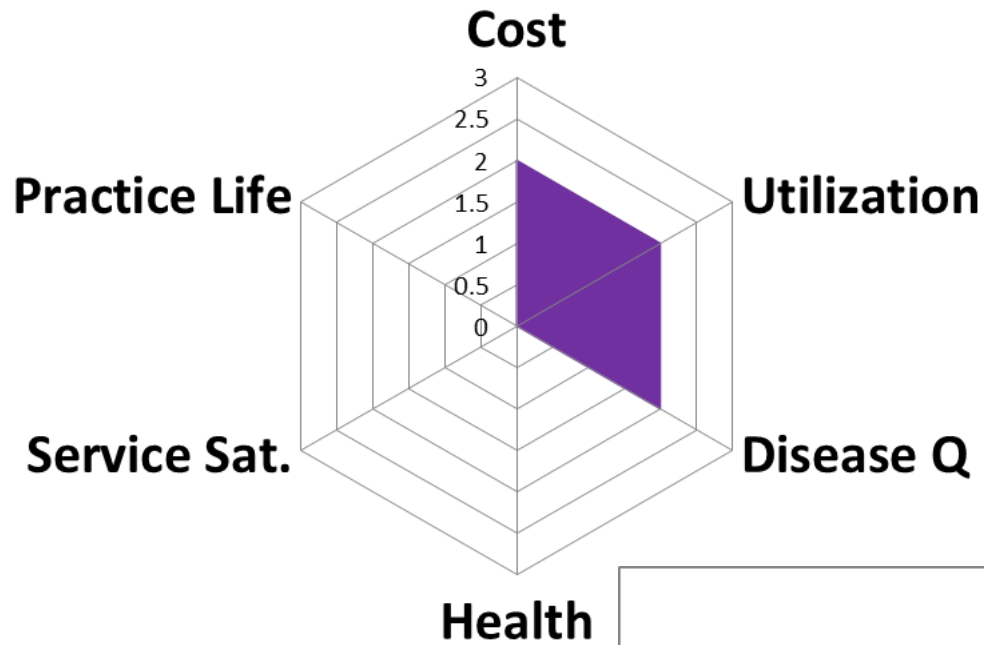
Hybrid PCMH



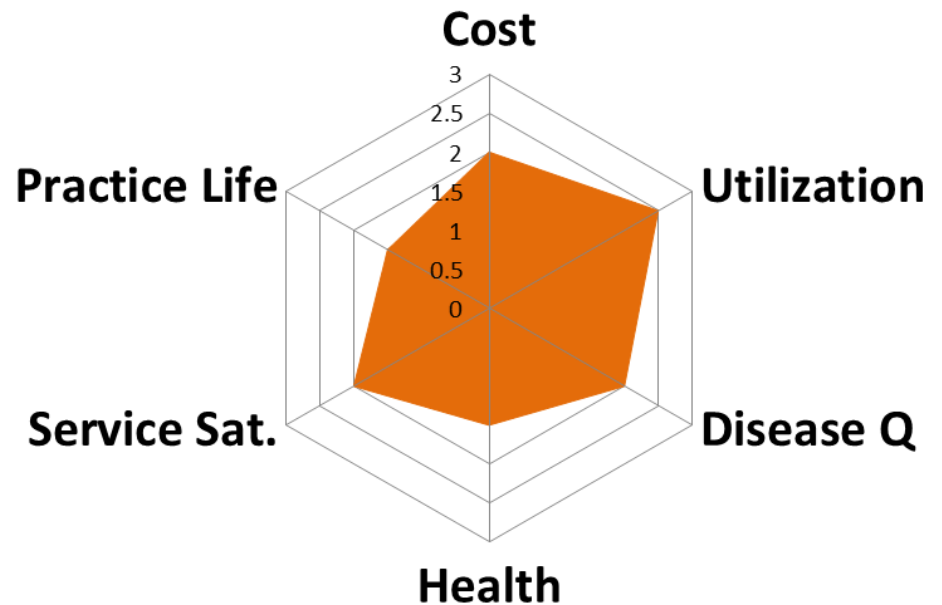
Transformed PCMH



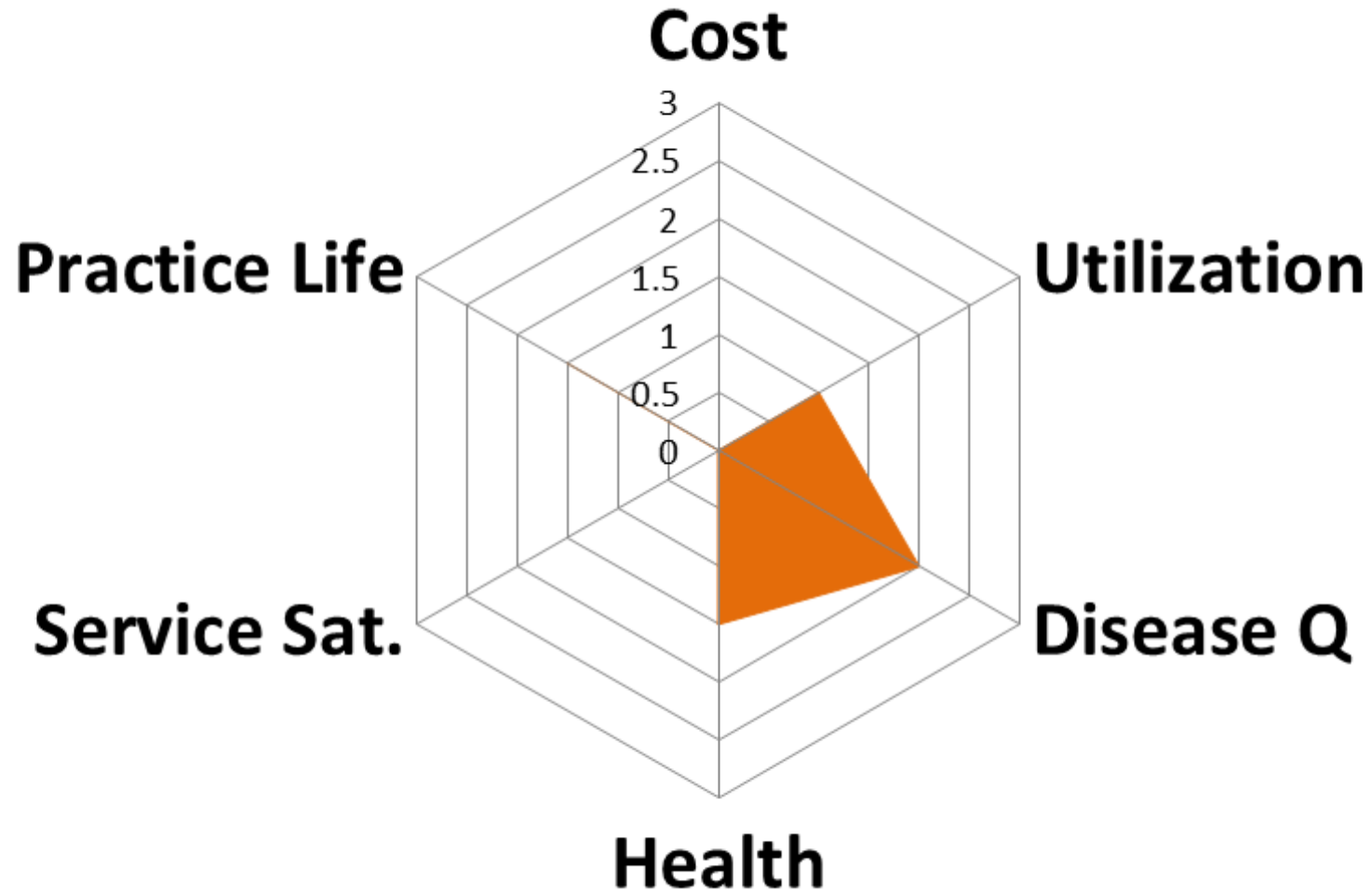
Private PCMH



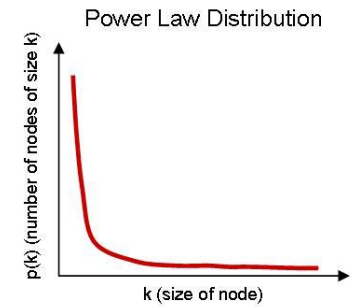
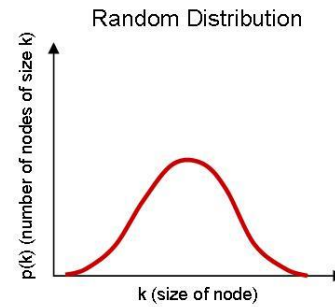
Public PCMH



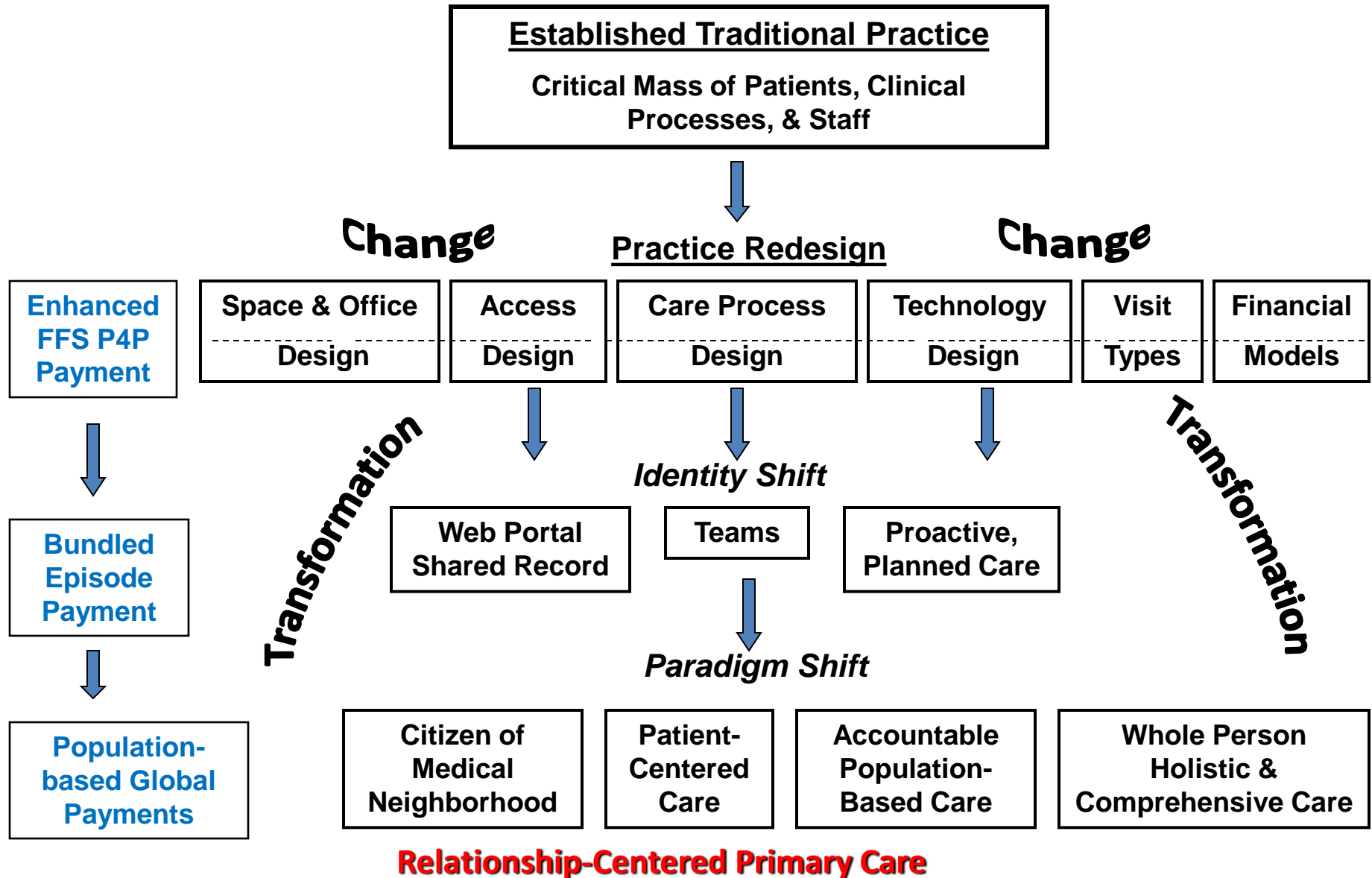
Pay for Performance?



Power Laws of Health



Change & Transformation

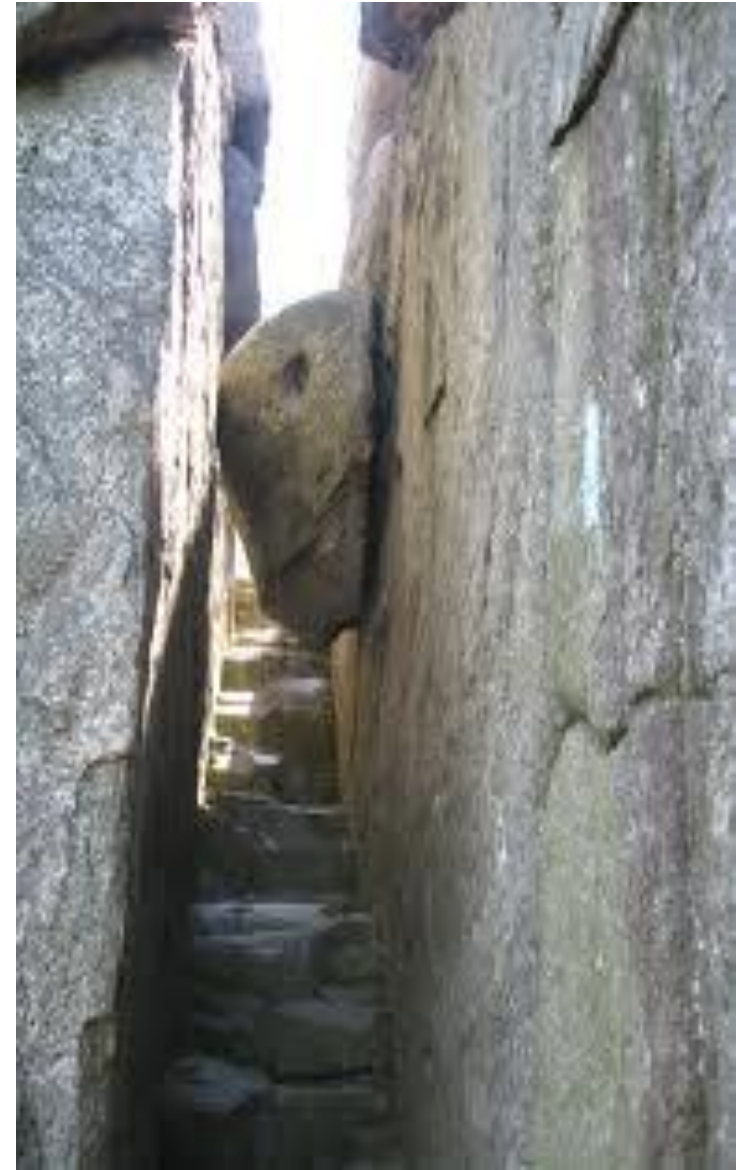
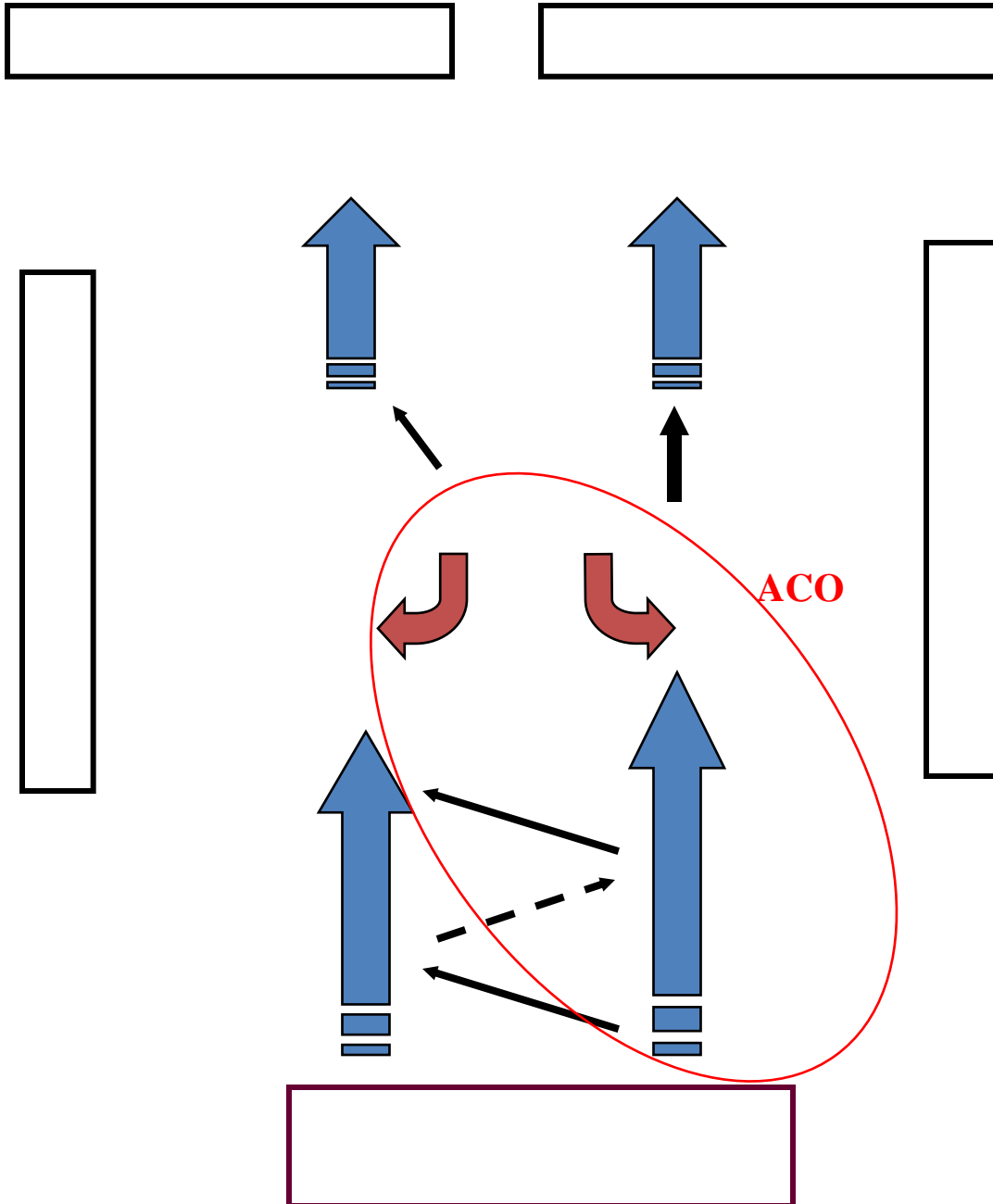


Prosperous Principles

- Be developmental
- Engage patients, families & community
- Engage physicians
- Follow & change the money
- Focus on simple rules
- Prioritize with power laws
- Utilize everyone's skills
- Optimize, not maximize
- Exemplify transparency
- Attend to local history



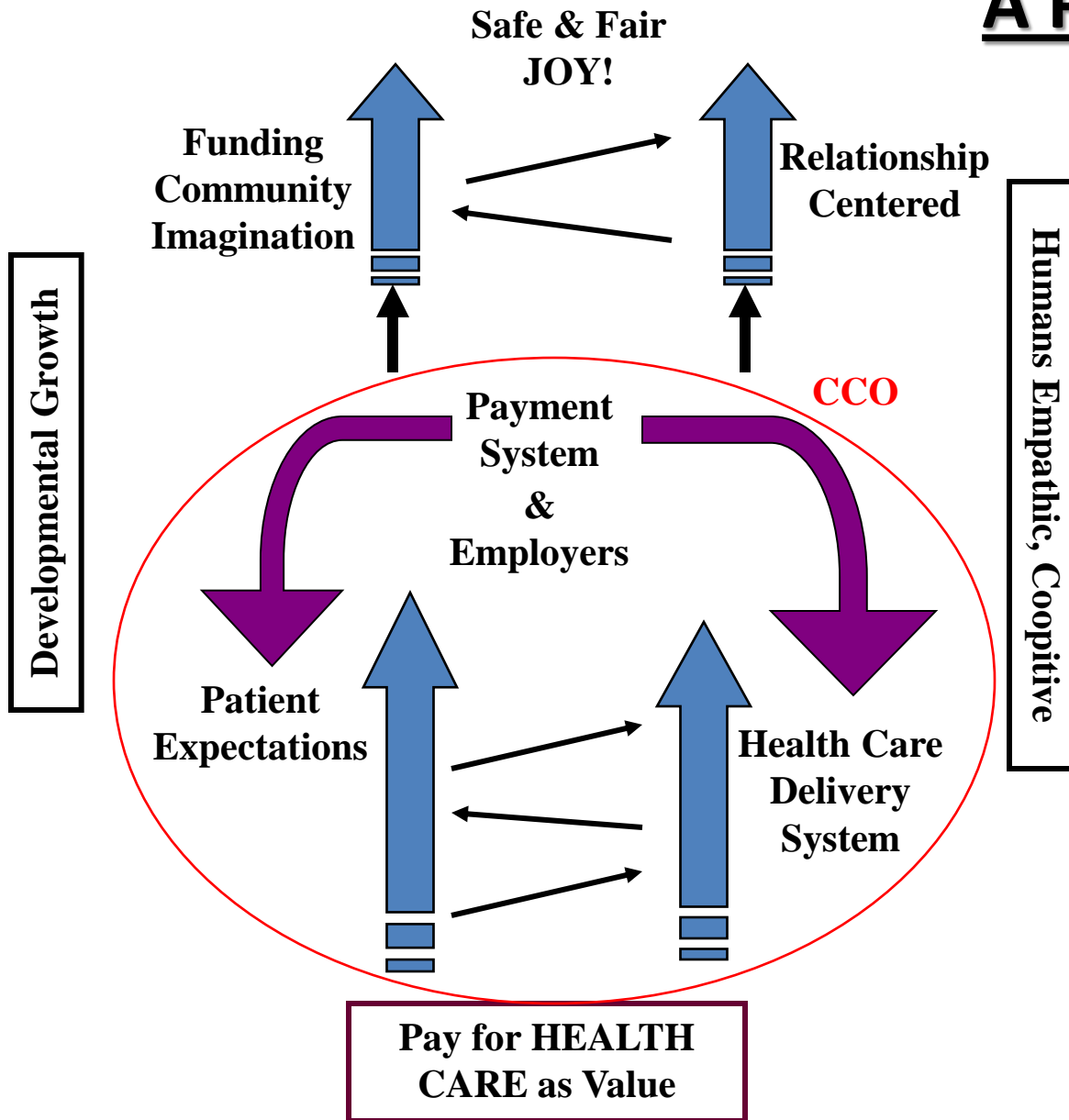
A Perilous Path



Complexity as Model of Life

Interdependent Agency

A Prosperous Path



Relationship Based Model of Care

By:

Margo A Karsten, PhD, MSN, RN

It is Patient Centered?

You decide!

Disclosure

I currently am the CEO of Creative
Health Care Management

Learning Objectives:

- Identify the essential components of Relationship Based Care
- Describe behaviors that enhance the clinician and patient relationship
- Design systems that promote patient and family integration into the care delivery model

I am convinced that the chaos we are experiencing in health care will settle down when we truly focus on the patient.

-- Marie Manthey



Essential Elements of Relationship Based Care



Caring and Healing Environment: Patients

- *Staff translate caring into behaviors, for example:*
 - *A patient's number one concern at admission drives their care*
 - *Having a seated conversation at eye level for 5 minutes*
 - *Asking key questions such as, "What can we do to help you feel well cared-for during this procedure?"*
 - *What do we need to know about you and your family to give you the best care?*
 - *Interdisciplinary meetings with the physician, nurse and other disciplines in the patient's room.*

Leadership and Teamwork

Why are unit practice/department
councils critical?

Professional Practice

Practicing to your full scope?

Share an example of professional practice?

Care Delivery System

Episodic vs. Continuity?

Patient Centric vs. Employee Centric

Who is accountable for these?

- Resources
- Outcomes

The Heart of Relationship- Based Care:

Therapeutic Relationships with Patients and their Families



Too often we underestimate the power of a touch, a smile, a kind word, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around.

Leo Buscaglia

Therapeutic Relationship:

the Heart of Relationship-Based Care

The therapeutic relationship is like no other; the clinician offers care, therapeutic touch, compassion, presence, and any other act or attitude that would foster healing, and expects nothing in return.

(Koloroutis & Trout, 2012)

Clinicians Facilitate 3 Key Patient Capabilities

1. Ability to cope
2. Ability to understand the meaning of the illness or injury
3. Desire to take ownership for his or her own healing

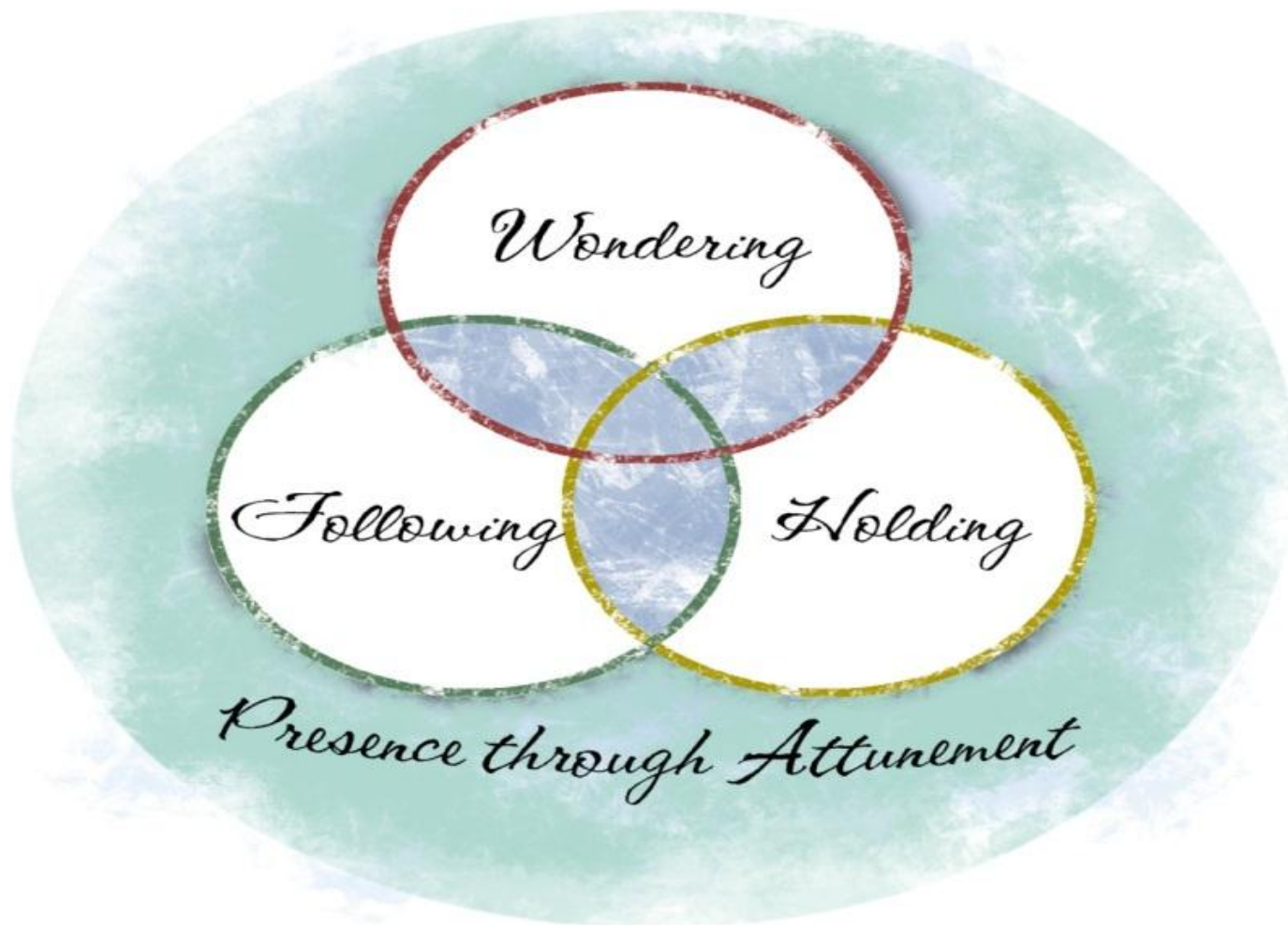


"Technical competence isn't optional; neither is kindness or genuine caring."

~ Marcus Engel

Presence through Attunement

- 'Attunement' suggests a level of connection (even if temporary) that leads the patient to resonate with the clinician and the clinician to resonate with the patient.
- For this to happen, the clinician must be emotionally available and authentically interested in the patient as a person.



THERAPEUTIC PRACTICES

- **WONDERING** — genuine interest and curiosity: to look; to see; to inquire; to listen; to notice and suspend assumptions, judgments and labels
- **FOLLOWING** — palpation of everything around us: to be led and taught by the other; to listen; to pay attention, to adjust our care to align with what we have learned
- **HOLDING** — an act of devotion which creates a safe haven for the person to heal : to protect from harm; to accept and hold with respect and dignity; to be a steady and nonjudgmental presence

Therapeutic Behaviors that Enhance the Experience of Patient Care

- Respectful, unhurried communication (Presence through Attunement, holding)
- Sharing timely information about what is happening and what will happen (holding)
- Giving reassurance (holding)
- Remembering and acting on what the patient has said is important (wondering, following and holding)
- Non-judging acceptance of emotional responses (holding)
- Showing genuine interest (attuning, wondering)
- Establishing authentic human connection (Therapeutic Relationship)

The most basic and powerful way to connect to another person is to listen. Just listen.

A loving silence often has far more power to heal and to connect than the most well-intentioned words.

Rachel Naomi Remen

What does this look like in
reality?

Best evolving model “Contented
Dementia”

There is hope.....

- “Family develops the care and the team delivers the care”

References

Koloroutis, M. and Trout, M. (2012). *See me as a person: Creating therapeutic relationships with patients and their families*. Minneapolis, MN: Creative Health Care Management.

Oliver, J. (2008). *Contented Dementia*. Vermillion, London. Ebury Publishing

Pritchard, E. J. and Dewing, J.(2001) 'A multi-method evaluation of an independent dementia care service and its approach', *Aging and Mental Health*, 5: 1, 63 — 72