

# PATIENT-CENTERED Health Care Systems

11.8.12 ④

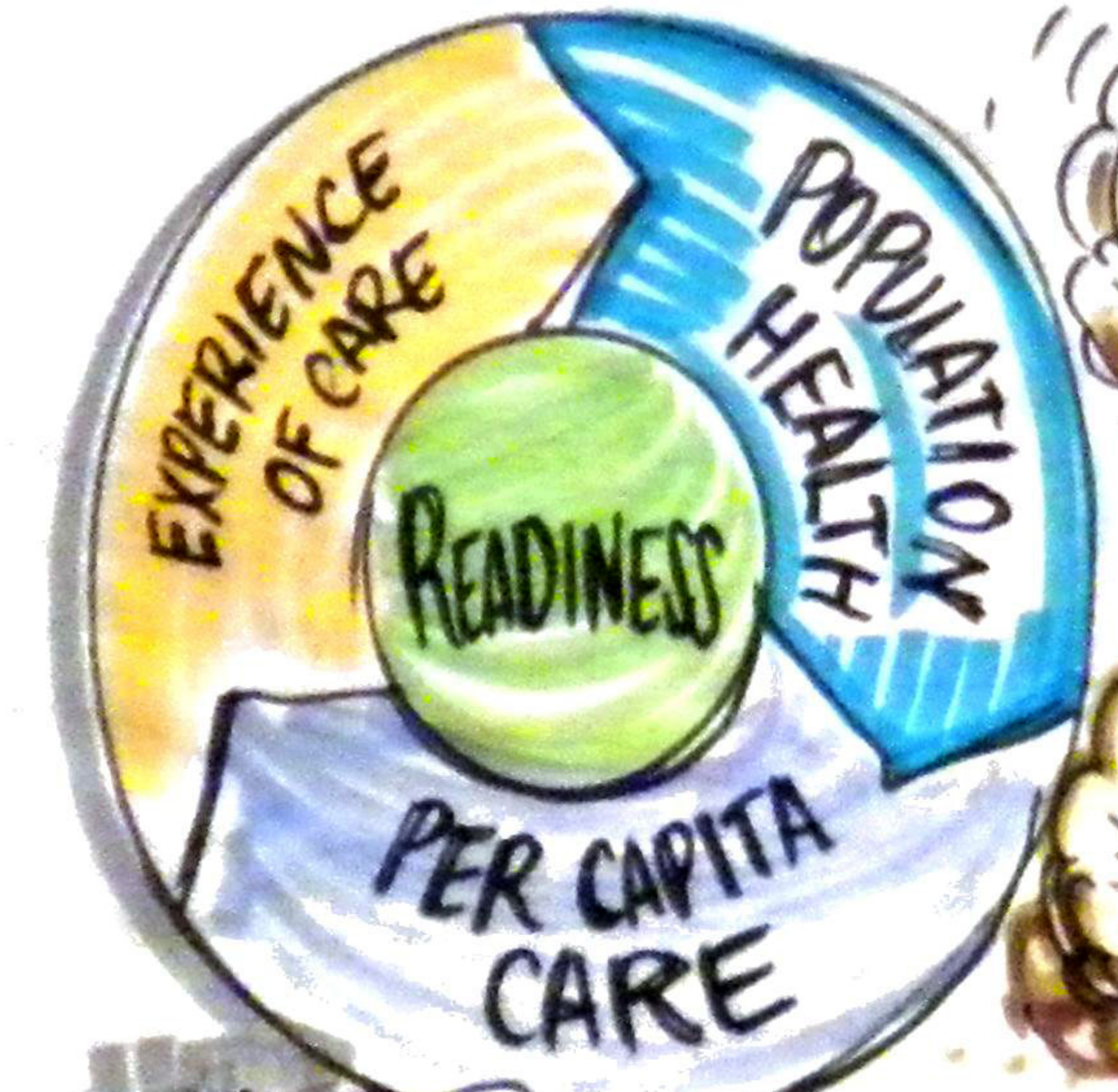


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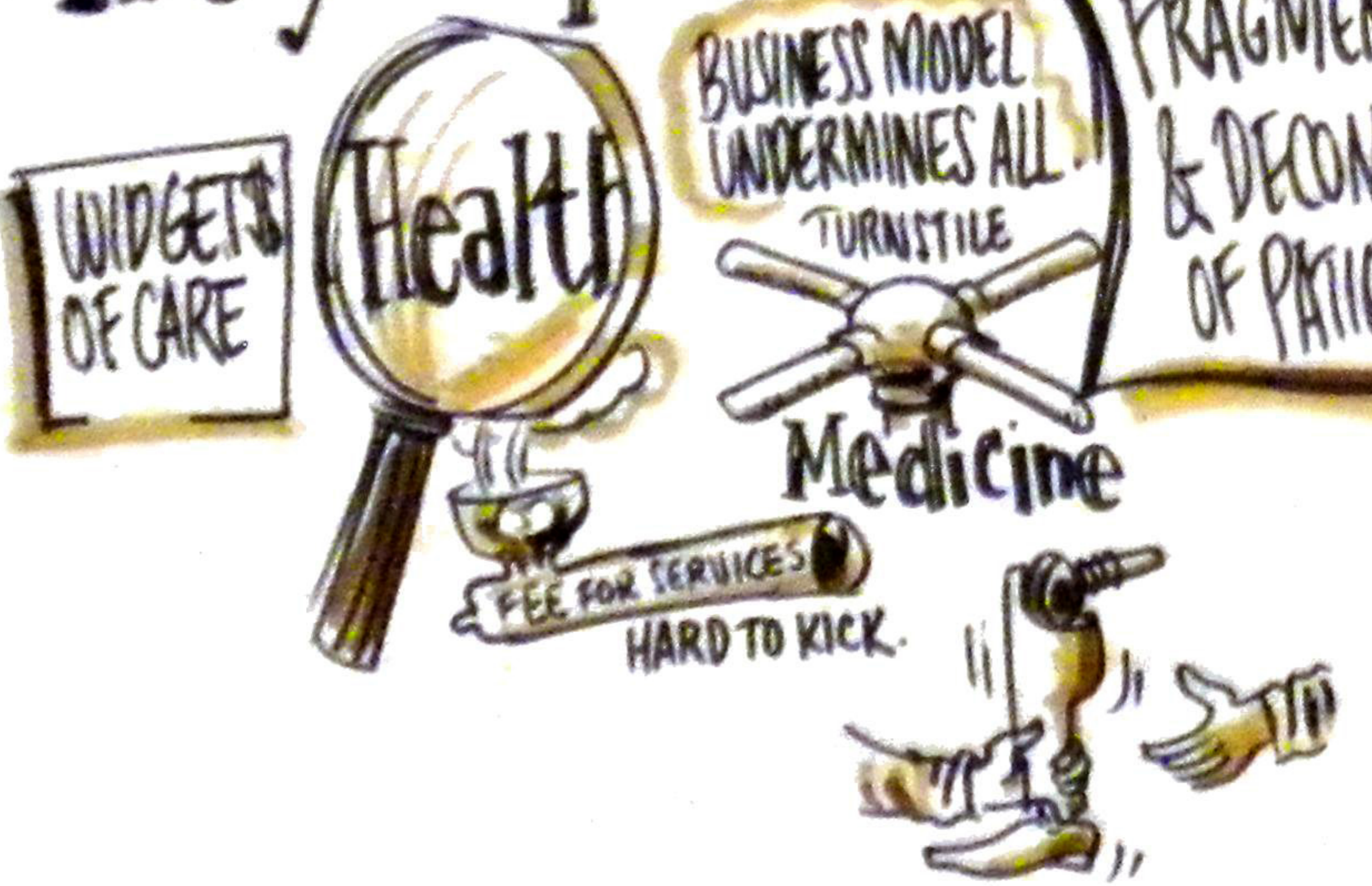
NOT NEUTRAL OR NEGATIVE

POSITIVE CONSULTATION



MHS QUADRUPLE AIM

Are you Optimal?



WHAT SHOULD IT LOOK LIKE?

MHS

IN VITRO → CENTURIANS



FRAGMENTATION & DECONSTRUCTION OF PATIENTS & FAMILIES

NO ONE'S Thriving

ALL are suffering

OVERSEAS FACILITIES

PUBLIC HEALTH

WHY DO WE ASPIRE TO DO WHAT WE DO WELL IN THE SYSTEM?

WHAT HAVE WE DONE TO CHANGE THE CULTURE?

COMPREHENSIVE SOLAR FITNESS

TOTAL FORCE FITNESS

INNER PROFESSIONAL HEALTH & WELL BEING

Structure: VETTING PROCESS METRICS

HELP ME, SON.

SUPER TROOPER...

MY WIFE Audrey... (HIGH PAIN THRESHOLD)

HISTORY OF LOWER BACK PAIN

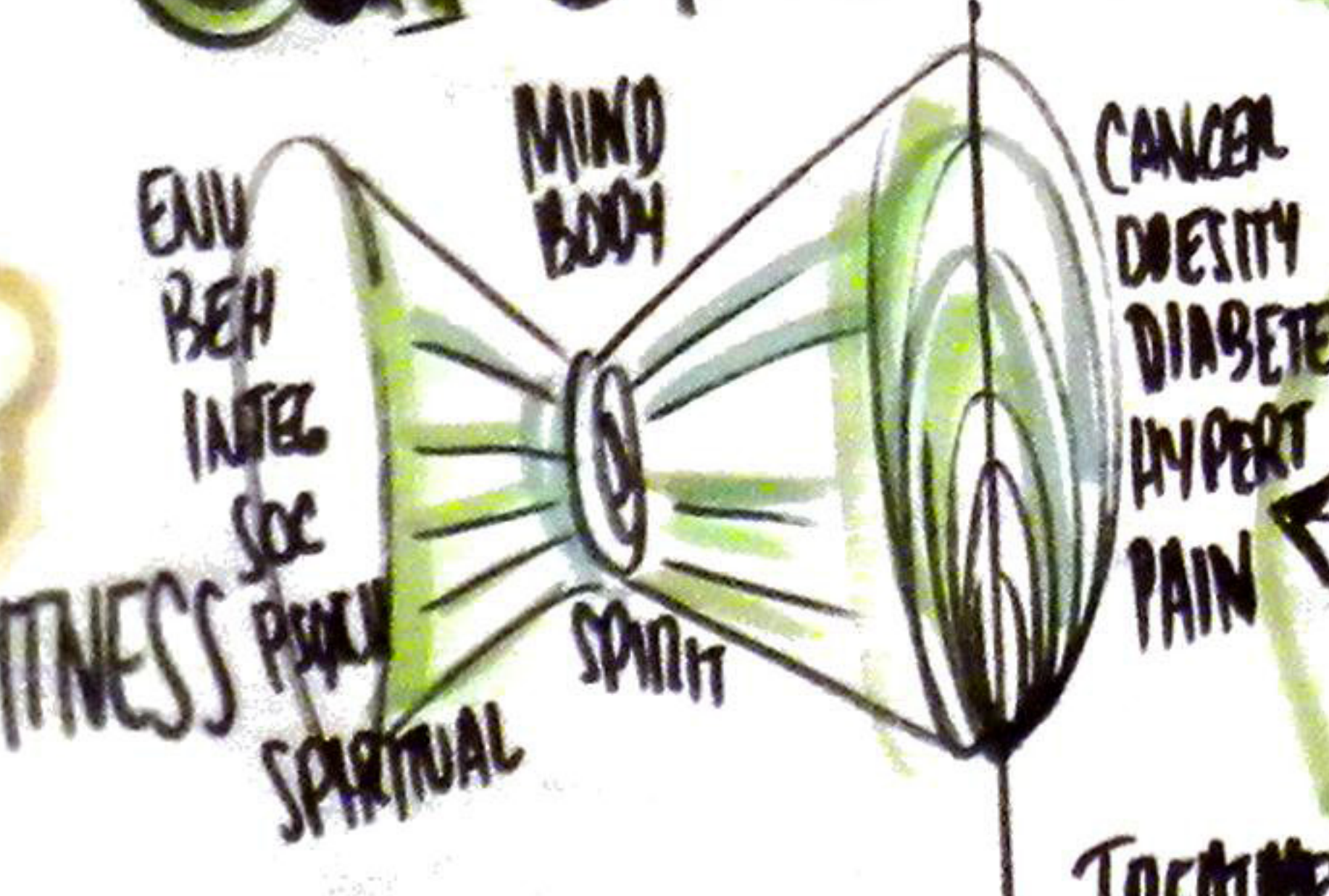
ACCUPUNCTURE OFFERED Real Relief

yoga

TURNED OUT TO BE THE Best Medicine.

Speak to an EXPANDED Audience

Cure Model



Pathogenesis

ILLNESS + DISEASE



WE NEED A THINK TEAM

Salutogenesis

HEALTH + WELL BEING

- RESILIENCE
- SOCIAL INTEGRAT
- PHYSICAL EXERCISE + REST
- OPTIMAL NUTRITION

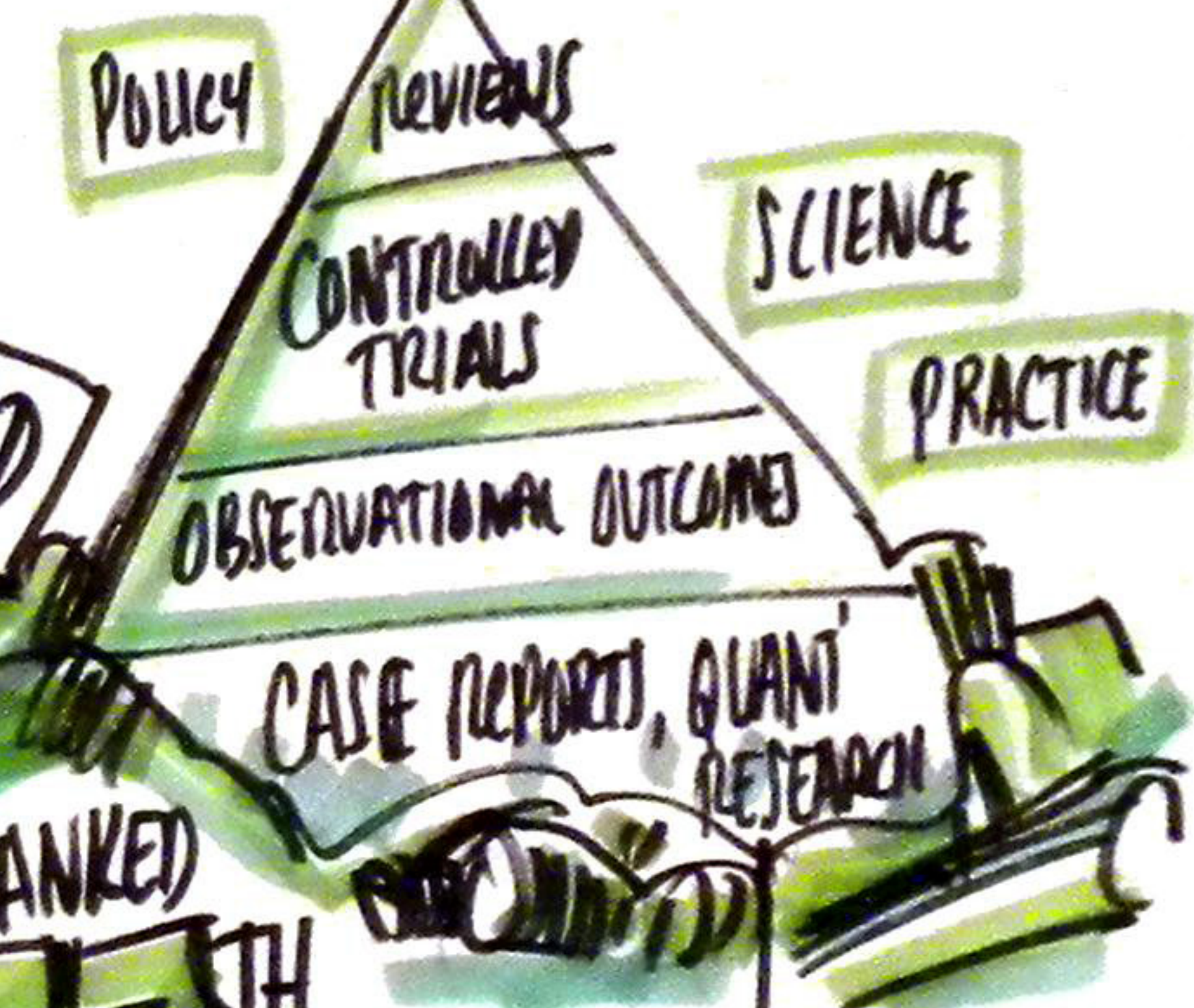
HOW TO WE INCORPORATE INTO A SYSTEM?

Health & Wellness

CULTURE

Trust.

Evidence HIERARCHY



RANKED 37TH IN THE WORLD

70% PATIENTS MAKE IT GO AWAY. FOR GOOD.

WHITE WELL EDUCATED ♂ 14 YEARS

BLACK POORLY EDUCATED ♂

FLOURISH!!

# FISH BOWL II

Patients Perspective on

HOW DO WE GET  
EFFECTIVE PATIENT  
INPUT?



RELATIONSHIP  
-BASED CARE  
the DISCONNECT

**COURAGEOUS**  
Leadership

PATIENTS PULLED  
INTO PROCESS IN BEGINNING  
- THEY HAVE THE ANSWERS

COMMITTED

SAFE ENVIRONMENT

EARS OPEN

RELATIONSHIP  
-BASED

SHARE YOUR  
FEEDBACK WITH  
YOUR PATIENTS

PATIENTS MUST BE  
AT THE TABLE

CUNICIAN  
LONGTERM CARE  
CARE

TO REDESIGN THE SYSTEM  
STORIES TOLD FIRSTHAND  
DO IT RIGHT, FROM THE BEGINNING



MOST PREVALENT

IT'S ABOUT HANDOFFS & COMMUNICATIONS  
NOT DOCTORS & NURSES  
R.N.P.s CAN HANDLE IT.

MUST READS



DESIGN  
IN NATURE  
BAYAN

PROFESSIONAL  
NICE PEOPLE

TRANSLATING  
INTO ACTIONS

IF [HE] CAN, I CAN

HOW CAN WE  
IMPROVE TRUST  
IN MINORITY  
COMMUNITIES?

LOOK TO  
THE CONGREGATIONAL  
HEALTH NETWORK  
- MEMPHIS, TN

IT'S TOUGH (SINCE HIPAA)  
TO SHARE, CANDIDLY,  
WITH PATIENTS

GOVERNANCE STRUCTURE:  
TRUST BUILDING INDEX

LISTEN & BE COMPASSIONATE

K.I.S.S.

COMPLETE TRANSPARENCY  
EMBED PATIENT IN PROCESS(ES)

TRUST-BUILDING  
COURAGE

FOSTER COURAGEOUS  
LEADERS WHO EMPOWER  
STAFF, FAMILIES & PATIENTS



FEAR  
OF MEDICALIZING SOCIAL CARE

MEDICAL  
NEMESIS



Positivism  
LENGTH OF STAY...  
EXTREME BURNS & AMPUTEES

NOT THE OMBUDSMAN  
SYSTEM

the WILL & COMMITMENT TO  
LISTEN  
- ESPECIALLY FUNDERS

Start w/ OUTCOMES

...THROUGHOUT  
THE PROCESS

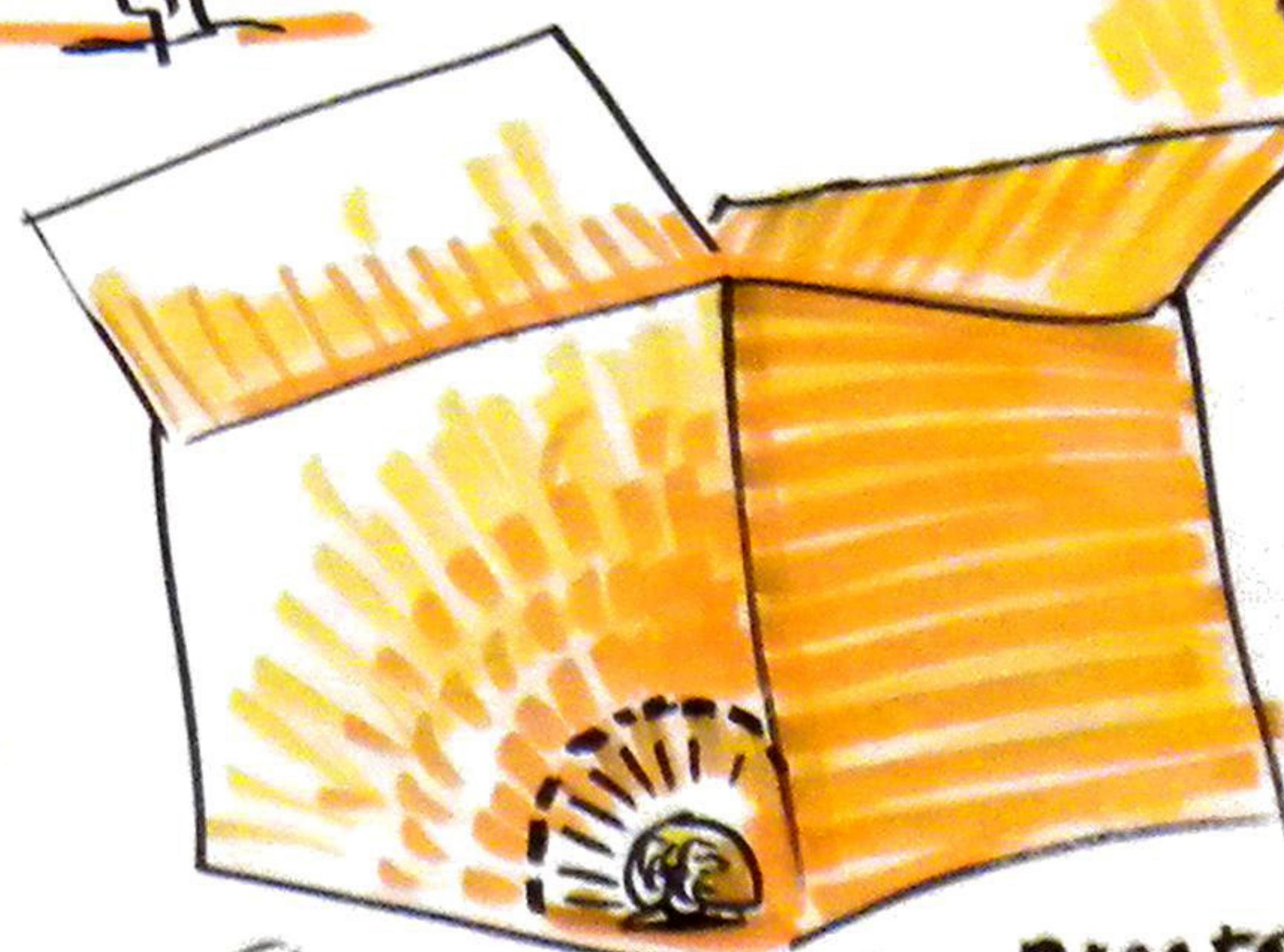
IN COLD BLOOD

WHOLISTIC VIEW



MUST  
ELIMINATE

COST OF CARE  
DEMAND FOR CARE



THINKING INSIDE THE BIGGER BOX

EVIDENCE-BASED

WERE NOT  
CAPTURING  
MEANINGFUL  
EVIDENCE THAT  
CAN INFLUENCE  
COMPLEX SYSTEMS

Mushy

We love it when  
Doctors apologize

the POWER  
OF NARRATIVE



IF [HE] CAN, I CAN

IT'S TOUGH (SINCE HIPAA)  
TO SHARE, CANDIDLY,  
WITH PATIENTS

Health System Models  
& Policy Priorities

The Threat of the  
**1000**  
MONOLITHIC SYSTEMS...

11-8-12

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