

Patient engagement in primary care: How family physicians can partner with patients

Anjana Sharma, MD MAS

Beatrice Huang | Mal O'Connor, Ph.D | Rachel Willard-Grace, MPH | Kevin Grumbach, MD

Family Medicine for America's Health: Patient Engagement Day
Webinar presentation
April 4, 2019

About Us



Anjana Sharma, MD MAS
Assistant Professor of Family
& Community Medicine



Beatrice Huang
Project Manager,
Analyst



Poll Question # 1 – About you

- What disciplines do we have represented on the call? (select all that apply)
 1. Quality improvement or patient experience leads
 2. Nursing
 3. Primary care clinicians (MD, DO, NP, PA)
 4. Patients/patient advocates
 5. Clinic or hospital management

- What is your practice setting? (Select all that apply)
 1. Solo or small primary care practice
 2. Medium size practice (5-10 providers)
 3. Large practice setting
 4. Rural
 5. Suburban
 6. Urban
 7. Federally qualified health center or safety-net clinic
 8. Academic institution

Overview

- What is patient engagement?
- Evidence base for patient engagement
- Family Medicine for America's Health case studies
- Tools for getting started

Patient engagement is a **hot** topic!



San Francisco
Health Network

Clinics & Hospitals ▾ Services

The Patient Advisory Council Collaborative

The PAC Collaborative aims to start and/or sustain

Clinics starting **NEW** Boards in 2015:

- Chinatown Public Health Center
- Southeast Health Center
- Potrero Hill Health Center
- Curry Senior Center
- Maxine Hall Health Center
- Castro Mission Health Center
- Positive Health
- Children's Health Center

Clinics with **EXISTING** Boards

- Tom Waddell Urban Health Center
- Family Health Center
- General Medicine Clinic (1M)
- Silver Avenue Health Center
- Ocean Park Health Center
- Balboa Teen Health Center



A Conference to Encourage Patient-Centered Outcomes Research

Kansas City, MO
Marriott / Country Club Plaza
Friday, June 29, 2018

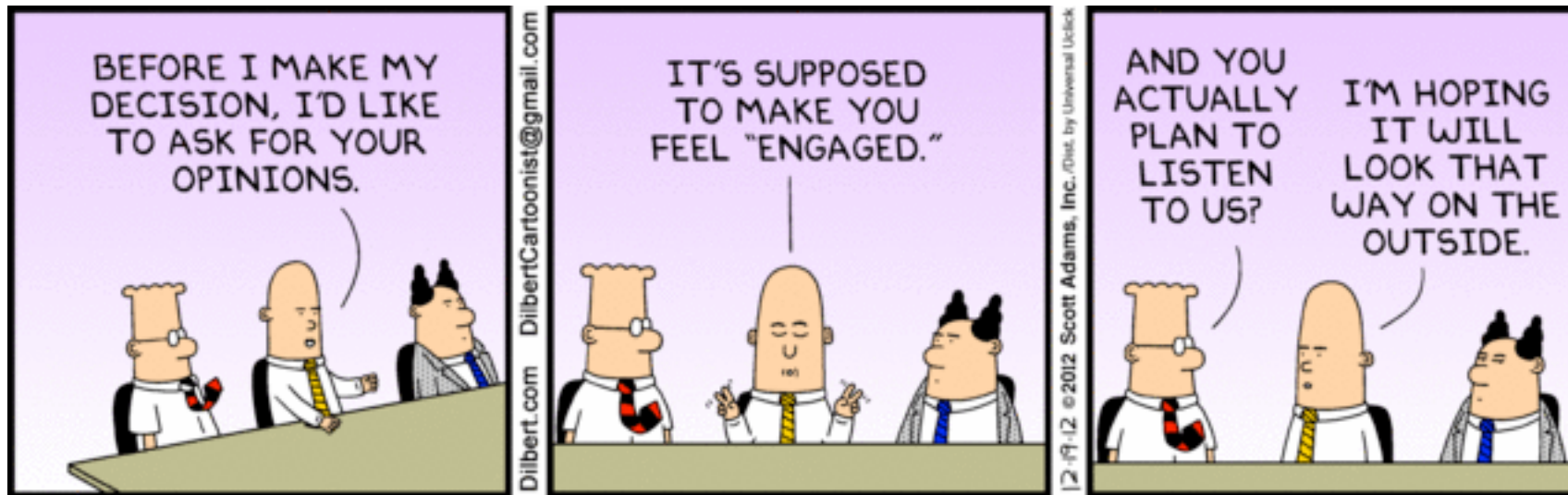
Welcome Reception: 4-6pm Thursday, June 28, 2018

Whether you've only recently heard of patient engagement
already started to explore the possibilities, or have extensive
experience, this is a must-attend Patient Engagement
conference.

FAMILY MEDICINE
for **AMERICA'S HEALTH**



What is patient engagement?



Poll # 2: What is your definition of patient and family engagement?

1. Patient adherence or compliance with medical care
2. Digital portals or digital apps to improve health
3. Health literacy
4. Patient feedback, in surveys or in advisory councils
5. Community input into healthcare needs
6. Patient advocacy for healthcare laws and policies

Hint: all of these are correct, but which is closest for YOU?

What does patient engagement actually mean?



Created by shashank singh
from Noun Project

“Patients, families, and caregivers working with healthcare staff in partnership to improve healthcare”

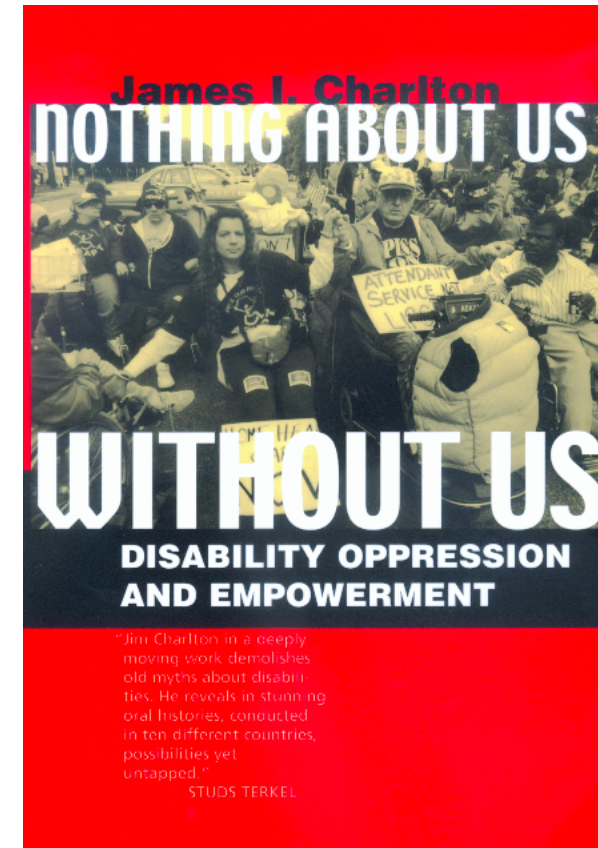


LEVEL OF PATIENT ENGAGEMENT	PATIENT ENGAGEMENT ACTIVITIES	CASE EXAMPLE
INDIVIDUAL	Shared decision-making, motivational interviewing, health coaching, self-management tools	A patient logs on to their electronic medical record and records their own blood pressure
ORGANIZATIONAL LEVEL (clinic, hospital or system-level)	Patient experience surveys, suggestion boxes, town-hall meetings, patient advisory councils, patients working on quality improvement or safety committees	A patient advisory council develops a new pamphlet to publicize mammograms to their patient population
POLICY	Advocacy organizations lobbying for healthcare causes	A Type 2 Diabetes organization meets with the mayor to advocate for a sugary beverage tax

Adapted from Carman KL, Dardess P, Maurer M, et al. Patient and family engagement: a framework for understanding the elements and developing interventions and policies. Health affairs. 2013;32:223-31.

Why should we engage patients?

- Justice issue: shift control back to historically oppressed populations
- Ethical issue: It's the right thing to do
- Utilitarian issue:
 - Helps for PCMH certification
 - Required for FQHCs
 - Attracts consumers
 - It makes healthcare interventions more effective (?)





Making the case for patient engagement: What's the evidence?

Does Patient Engagement Affect Outcomes?

- Stronger evidence for **individual** patient engagement
 - Patient Activation Measure (PAM)
 - Shared Decision Making
 - Motivational interviewing
 - Health coaches
- Less evidence for **clinic-level** patient engagement
 - *But we are working on it....*

Systematic Review: Results

- Results: 639 articles found, 32 selected for final review
1. 17 case studies/anecdotal impacts on patient satisfaction, reduced falls, improvements to clinic and hospital layouts
 2. 4 community based studies: improved colorectal cancer screening, inhaler use, BP control
 3. 1 cluster RCT: patient advisors identified priorities more aligned with the PCMH and Chronic Care Model

Clinical outcomes

- Colorado based quality improvement initiatives of “boot camp translation” – community advisors helped translate health messages
 - Blood pressure
 - Asthma
 - PCMH messaging
 - Colorectal cancer

Boot Camp Translation: A Method For Building a Community of Solution

Ned Norman¹, Chris Bennett¹, Shirley Cowart¹, Maret Felzien¹, Martha Flores¹, Rafael Flores¹, Connie Haynes¹, Mike Hernandez¹, Mary Petra Rodriquez¹, Norah Sanchez¹, Sergio Sanchez¹, Kathy Winkelman¹, Steve Winkelman¹, Linda Zittleman, MSPH², and John M. Westfall, MD, MPH²

¹Community Advisory Council of the High Plains Research Network, Department of Family Medicine, University of Colorado Denver School of Medicine, Mail Stop F496, AO1, Aurora, CO 80045

²High Plains Research Network, Department of Family Medicine, University of Colorado Denver School of Medicine, Mail Stop F496, AO1, Aurora, CO 80045

Abstract

Objective—The National Institutes of Health (NIH) spend billions of dollars annually on biomedical research. A crucial, yet currently insufficient step is the translation of scientific evidence-based guidelines and recommendations into constructs and language accessible to every-day patients and community members. By building a community of solution that integrates primary care with public health and community-based organizations, evidence-based medical care can be translated into language and constructs accessible to community members and readily implemented to improve health.

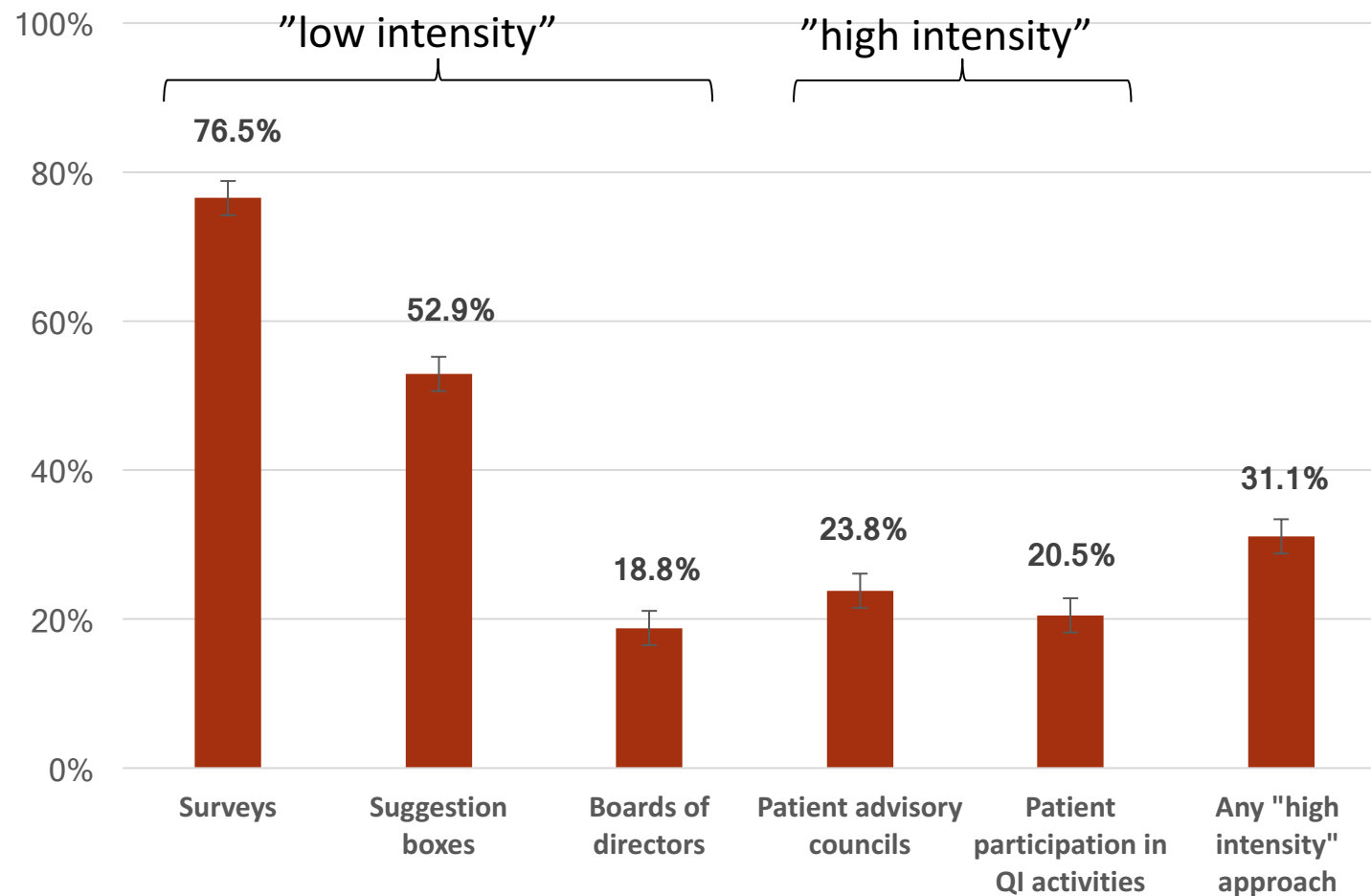
Clinical operations

- Customer service training
- Evening access/drop-in hours
- Feedback on web portals
- Advance directive packet

Sharma A, Angel L, Bui Q. Patient Advisory Councils: Giving Patients a Seat at the Table. Family practice management. 2015 Jul-Aug;22(4):22-7. Sharma AE, Knox M, Mleczko VL, Olayiwola JN. The impact of patient advisors on healthcare outcomes: a systematic review. BMC health services research. 2017;17(1):693.

ABFM Survey on Patient Engagement

- Results: Family docs (1,368) practicing in ambulatory setting



ABFM Survey on Patient Engagement

- Notables:
 - Patient experience surveys are highly prevalent
 - Of all practices, 31% have high-intensity patient engagement
 - Of all PCMHs, 58.5% have high-intensity patient engagement
- What predicts HIGH-INTENSITY Patient Engagement (patients in QI or patient advisory councils):
 - Practice size: aOR 3.30, 95% CI (1.96, 5.57)
 - PCMH status:
 - Certified PCMH aOR 2.19 (1.62, 2.97)
 - % Vulnerable populations served: aOR 1.83 (1.18, 2.84)

Poll #3: What patient engagement activities do you have at your site?

1. Patient advisory councils
2. Patients on our governing board
3. Patient feedback surveys
4. Patients belong to QI teams
5. Town halls or community meetings
6. Informal, one-on-one feedback

Family Medicine for America's Health: Patient Engagement Tactic Team

Common concerns about patient engagement

- Patient engagement is only possible in systems with lots of resources
- Patients and families aren't interested or able to provide feedback to their clinic
- There's no return on investment in engaging patients and families
- Patient engagement isn't possible at my practice because [____]

Project Purpose: To identify and share innovative strategies for patient engagement at the organizational level in **diverse** practice settings!

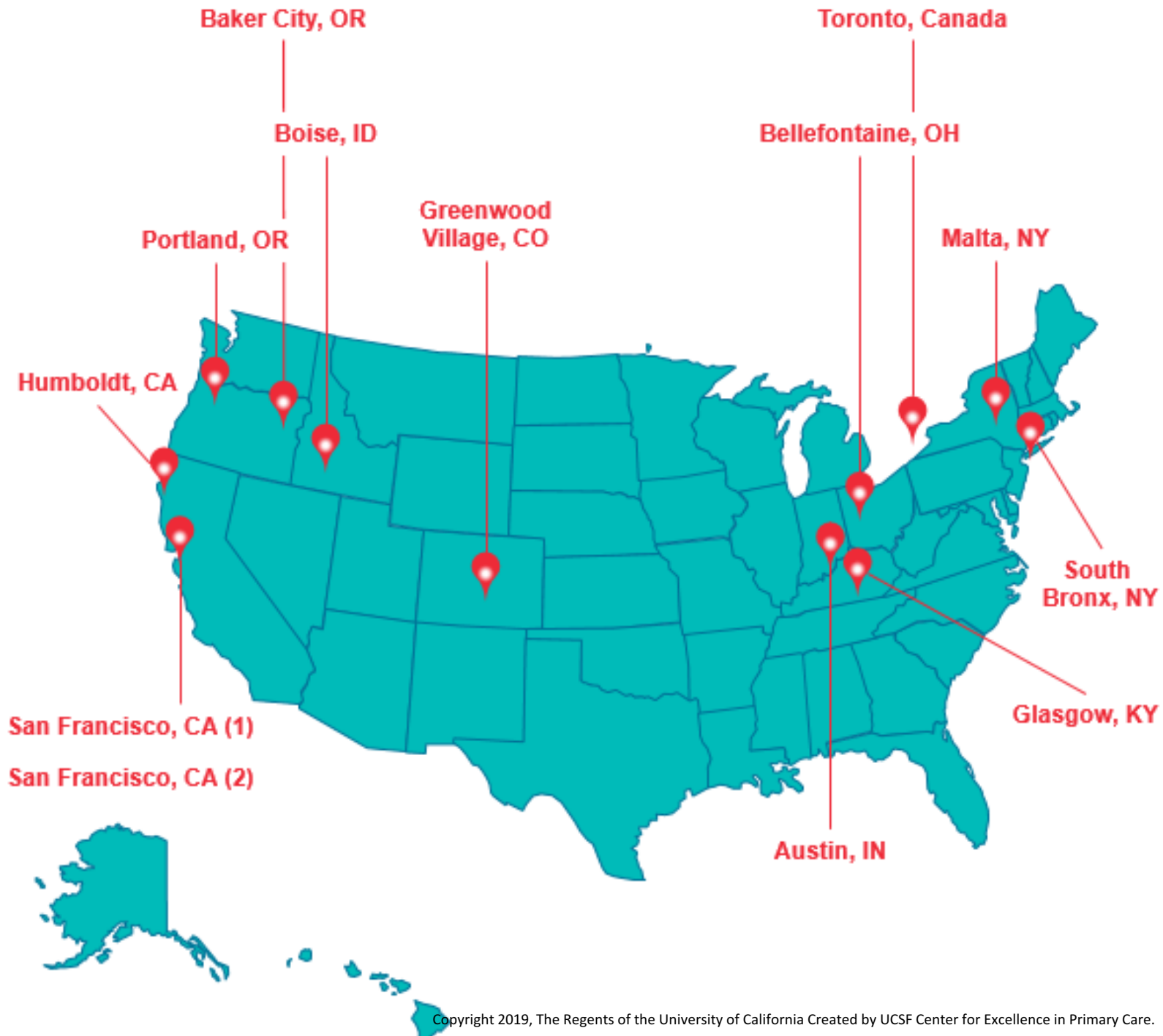
What did we do?

- **Setting:** Interviewed clinic leaders across North America
- **Recruitment:** Convenience sampling to identify practices representing diverse geographic regions and practice characteristics
- **Interview:** Telephone-based, with interview guide
- **Aim:** to assess **organizational-level** patient engagement, how they made it work, and what impact it had

What did we find?



Case Study Sites



Site Demographics

Practice Type	Count (n=13)
Private	5
Public	8
Academic	4

*Being an academic site was not mutually exclusive with being a private/public site

Practice Setting	Count (n=13)
Rural	5
Urban	6
Suburban	2

Practice Size	Count (n=13)
Small	3
Medium	5
Large	5

St. Michael's Hospital Academic Family Health Team

Toronto, Canada

Site Profile

What did they do?

What was the result?

“Many people jump into patient advisory committees and they may not always be ready for that... Even bringing patients together for a day is great and it was great for our team.”

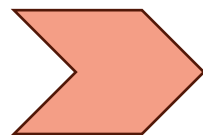
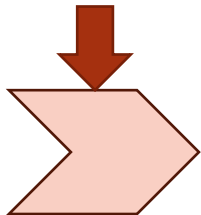
– Dr. Tara Kiran, Director of Quality Improvement

low income, immigrant,
refugees

day event where patients
identified pain points and
provided recommendations

- Demonstrated value of
patient engagement

Low
intensity



High
intensity

Medical Associates Clinic

Glasgow, Kentucky

Site Profile

- **Practice type:** Rural, Independent clinic
- **Practice size:** Small (several thousand patients)
- **Patient demographics:** Rural, geriatric. Serves 12 counties in Appalachian Mountain region

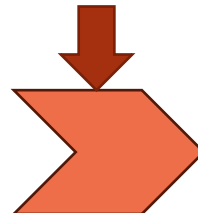
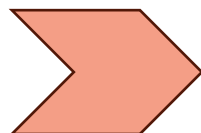
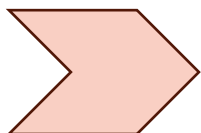
What did they do?

- Many patients not bringing medications was a problem especially with geriatric pop.
- **Patient Quality Circles** – quarterly forums where patients come together
- Brought issue to a patient quality circle meeting

What was the result?

- One suggestion was to print reminder on appointment cards, which resulted in more people bringing in their medications
- More patients now volunteer their input regarding clinic processes

Low
intensity



High
intensity

Hypertension Equity Group

San Francisco, California

Site Profile

- **Practice type:** Urban, public health system
- **Practice size:** Large (currently serves over 120,000 individuals)
- **Patient demographics:** Underserved, safety net patient population

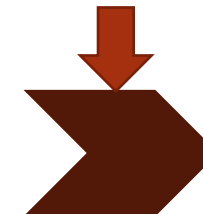
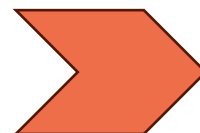
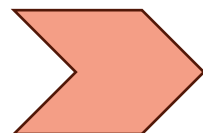
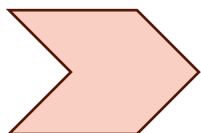
What did they do?

- Patients serve as **active workgroup members**
- Participate in monthly meetings to review data and design strategies, presented at meetings

What was the result?

- Patient guided interventions
 - Home blood pressure monitoring toolkit – more tailored for B/AA community
 - Food pharmacy
- Mission statement

Low
intensity



High
intensity

Misconceptions

Common ~~concerns~~ about patient engagement

- ✗ Patient engagement is only possible in systems with lots of resources
- ✗ Patients and families aren't interested or able to provide feedback to their clinic
- ✗ There's no return on investment in engaging patients and families
- ✗ Patient engagement isn't possible at my practice because [___]

Final poll: What information was new or surprising for you?

1. Patient or community input can make quality improvement projects more effective
2. Over one-third of family medicine clinics in the US are engaging patients in advisory councils or quality improvement
3. Patient engagement happens at solo and small practices as well as larger clinics
4. Patient engagement is a branding strategy -- it may increase patient satisfaction and consumer retention

Conclusions

- Patient advisors generate novel ideas for service improvement.
- There is NO one-size-fits-all for patient engagement at the clinic level.
- Patient engagement strategies can be tailored to the capacity of the clinic and needs of the community.





Tools for getting started

“TOP 10 PATIENT ENGAGEMENT TIPS”

#10: Send periodic emails to your patients to share wellness education and clinic updates.

#9: Hold a one-time patient engagement day where folks can provide input and receive health education in a town hall-style format.

#8: Set up a patient advisory council and ask participants to discuss social needs that affect the health of their community.

#7: Ask your patient advisory council to brainstorm ideas to reduce appointment wait times.

#6: Invite patient advisors to provide recommendations on branding your clinic.



“TOP 10 PATIENT ENGAGEMENT TIPS”

- #5: Involve patients in your strategic plan, mission and vision.
- #4: Include patient advisors in quality improvement (QI) by putting members on QI teams and working groups.
- #3: Consider having patient advisors review aggregate data, run charts and help brainstorm new QI projects.
- #2: Have your advisory council discuss clinic protocols for specific diseases, such as HIV infection and diabetes.
- #1: Ask your patient advisors to share their stories of structural racism and discuss how racism in medicine affects health outcomes.

Next steps to learn more



- Toolkits, videos, and more at
 - <https://cepc.ucsf.edu/patients-transformation-partners>
- Institute for Patient and Family-Centered Care
 - <http://www.ipfcc.org/>
- Agency for Healthcare Research and Quality
 - <https://www.ahrq.gov/professionals/quality-patient-safety/patient-family-engagement/index.html>

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- AAFP and ACOFP, and all member organizations of FMAHealth

Thank you!

Let's continue the conversation:

#PatientEngagementDay2019, #PatientEngagement

Anjana Sharma anjana.sharma@ucsf.edu - @AJSharmaMD

Center for Excellence in Primary Care - @UCSFCEPC

Department of Family & Community Medicine

University of California, San Francisco