

The Power of Patient Perspectives

Compassion in Action Webinar Series

February 12, 2019

Moderator



Stephanie Adler Yuan
Director, Education & Training
The Schwartz Center for Compassionate Healthcare

Audience Reminders

This webinar is funded in part by a donation in memory of Julian and Eunice Cohen.

You may submit a question by typing it into the Question and Answer pane at the right of your screen at any time.

We value your feedback! Please complete our electronic survey following the webinar.

Host



Beth Lown, MD
Medical Director

The Schwartz Center for Compassionate Healthcare

September 8-10, 2019

THE
**COMPASSION
IN ACTION**
HEALTHCARE CONFERENCE



the schwartz center
FOR COMPASSIONATE HEALTHCARE

Today's Speaker



Gregory Makoul, PhD MS
Founder and CEO
PatientWisdom, Inc.

Professor of Medicine | UConn School of Medicine
Faculty | Yale School of Medicine
Editor-in-Chief | Patient-Centered Innovation
(special section of Patient Education & Counseling)

Overview

Goals

- Recognize how patient stories can inform health professional education and serve as a touchstone for practice
- Describe how finding out what matters to patients can improve the experience and delivery of care in everyday practice

Highlights

- Xs and Oh! – Patient-centered care sounds simple, but simple things can be hard
- Patient Narrative Videos – Focusing trainees, faculty, staff, and leadership on the illness experience
- Concepts of Health – An example of how patient perspectives broaden professional perspectives
- Patient-Generated Contextual Information – Bringing ‘what matters’ to everyday clinical practice

Disclosures

- Greg is Founder and CEO of Patient Wisdom, Inc. and will show screenshots to illustrate one way of integrating ‘what matters to patients’ into the workflow.

Reality check: Patient-centered care sounds simple

Respect patients as people.

Pay attention to patient perspectives.



Simple things can be hard.
Solutions have to be easy.

Xs and Oh!

FROM THE OXFORD STUDY CODEBOOK

IF, DURING A PARTICULAR TURN, THE MD OR PT IS NOT TALKING ABOUT A PROBLEM OR SOLUTION, WE WILL NOT CODE THAT TURN. INSTEAD, MARK AN "X" ON THE APPROPRIATE LINE.

PT: X

MD: X

PT: X

MD: P₁H?

PT: P₁H

MD: P₁H?

PT: P₁H, P₁E

MD: P₁E#, P₁H?

PT: P₁H

MD: P₁D>

Xs and Oh!

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PT: P₁H
MD: P₁D>

Sharing patient stories changes lives. And culture.



Makoul G. Using patient narrative videos for understanding better the illness experience. *Academic Medicine*. 1999;74:580-581.

Christopher K, Makoul G. Patient Narrative Videos: Learning from the illness experience. In R Fisher & P Twohig (eds.), *Making Sense of Health, Illness & Disease*. New York: Rodopi, 2004.

Concepts of Health

*Are you healthy?
How do you know?*

POLLING QUESTION 1

Physical

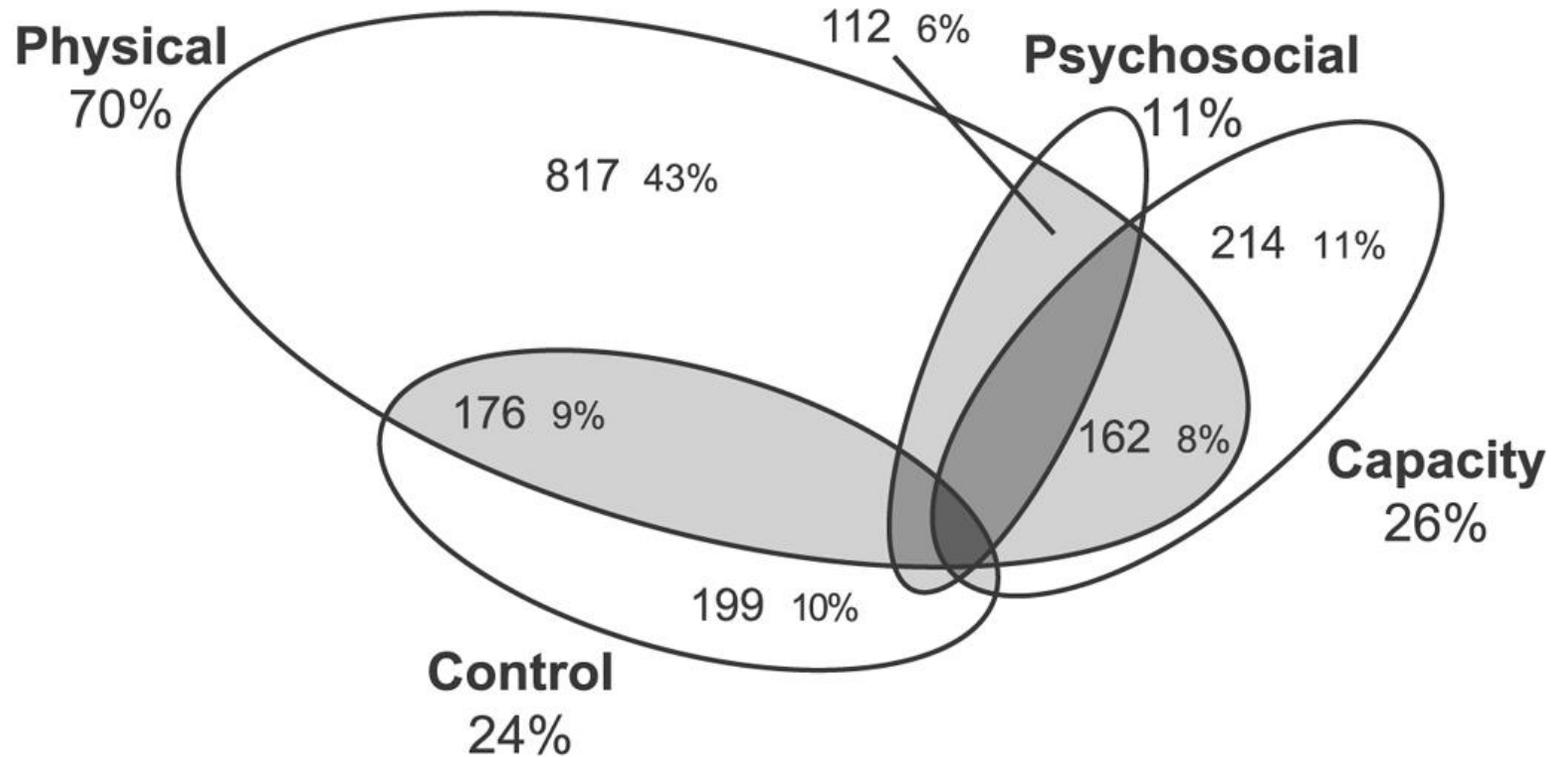
Psychosocial

Are you healthy?
How do you know?

Capacity

Control

Concepts of Health



Note: N=1917. Only areas with numbers shown are drawn approximately to scale. Unlabeled areas equal 34 (2%) participants or fewer.

POLLING QUESTION 2

When you hear people say why they love their doctor (nurse, et al) *or they don't...*

What do they say?

Better communication = Better outcomes

Patients and families feel better.



↑ PATIENT SATISFACTION¹



↑ HEALTH OUTCOMES^{2,3}

Clinical encounters work better.



↑ PROVIDER SATISFACTION⁴



↑ ADHERENCE^{3,5,6}

Health organizations do better.



↓ READMISSION⁷



↑ COMPETITIVE ADVANTAGE⁹



↑ REIMBURSEMENT¹¹



↓ MALPRACTICE⁸



↑ LOYALTY¹⁰



↑ MARGINS⁷

The missing link: Understanding what matters



Patient Engagement Strategies Lack Patient Voice, Consumer Input

92% of healthcare organizations value patient engagement strategies, but most do not incorporate the patient voice into designing those efforts.

1/29/2018 from Health Care Transformation Task Force



Modern medicine's true healing potential depends on a resource that is being systematically depleted: the time and capacity to truly listen to patients, hear their stories, and learn not only what's the matter *with* them but also what matters to them.

Dr. Rana L.A. Awdish & Leonard L. Berry, 10/09/2017



Erin Moore
@ekeeley Moore

It would be relevant to me if you joined me in what I'm doing instead of trying to "engage" me in what you're doing
[#MedX](#)

9/17/16, 11:32 AM from [Stanford, CA](#)

Why should we care? Better care.

11%

Visits in which clinicians have a complete picture of their patients' agenda

Christine A Barry, Colin Bradley, Nicky Britten, Fiona A Stevenson, Nick Barber. Patients' unvoiced agendas in general practice consultations: qualitative study. BMJ 2000;320:1246.

3.7x

Improvement in health outcomes with patient contextual data

Saul Weiner, Alan Schwartz, Gunjan Sharma, Amy Binns-Calvey, Naomi Ashley, et al. Patient-centered decision making and health care outcomes: An observational study. Ann Int Med 2013;158:573.



Opportunity: Make it easy to focus on what matters



Patients have brief encounters with healthcare providers, but deal with health more than 5,000 waking hours per year.

- Knowing what matters to them is valuable. Yet mostly unheard.
- Need an easy, systematic way to capture and share what they see as important.



Providers are busier than ever, making it harder to connect with their patients.

- 15 minutes per patient, 67% of time on EHR/deskwork, 54% report burnout.
- Need a quick, reliable way to learn about the whole patient – in the workflow.



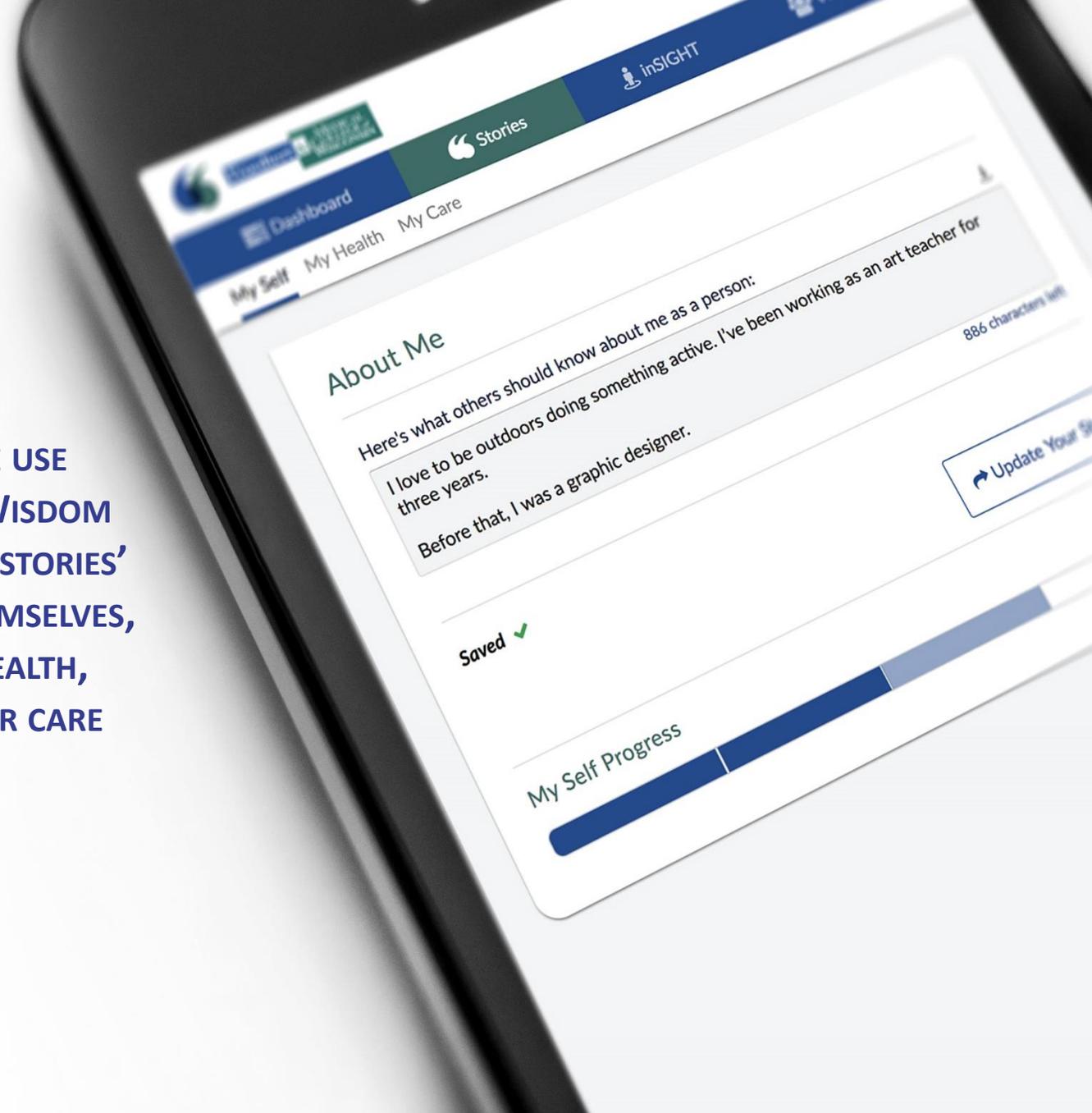
Most organizations approach patient engagement on their terms, not on patients' terms.

- True engagement improves decisions, outcomes, experience, and loyalty.
- Need clear lines of sight to meaningful summaries of patient perspectives.

BEFORE VISIT



PEOPLE USE
PATIENTWISDOM
TO SHARE 'STORIES'
ABOUT THEMSELVES,
THEIR HEALTH,
AND THEIR CARE



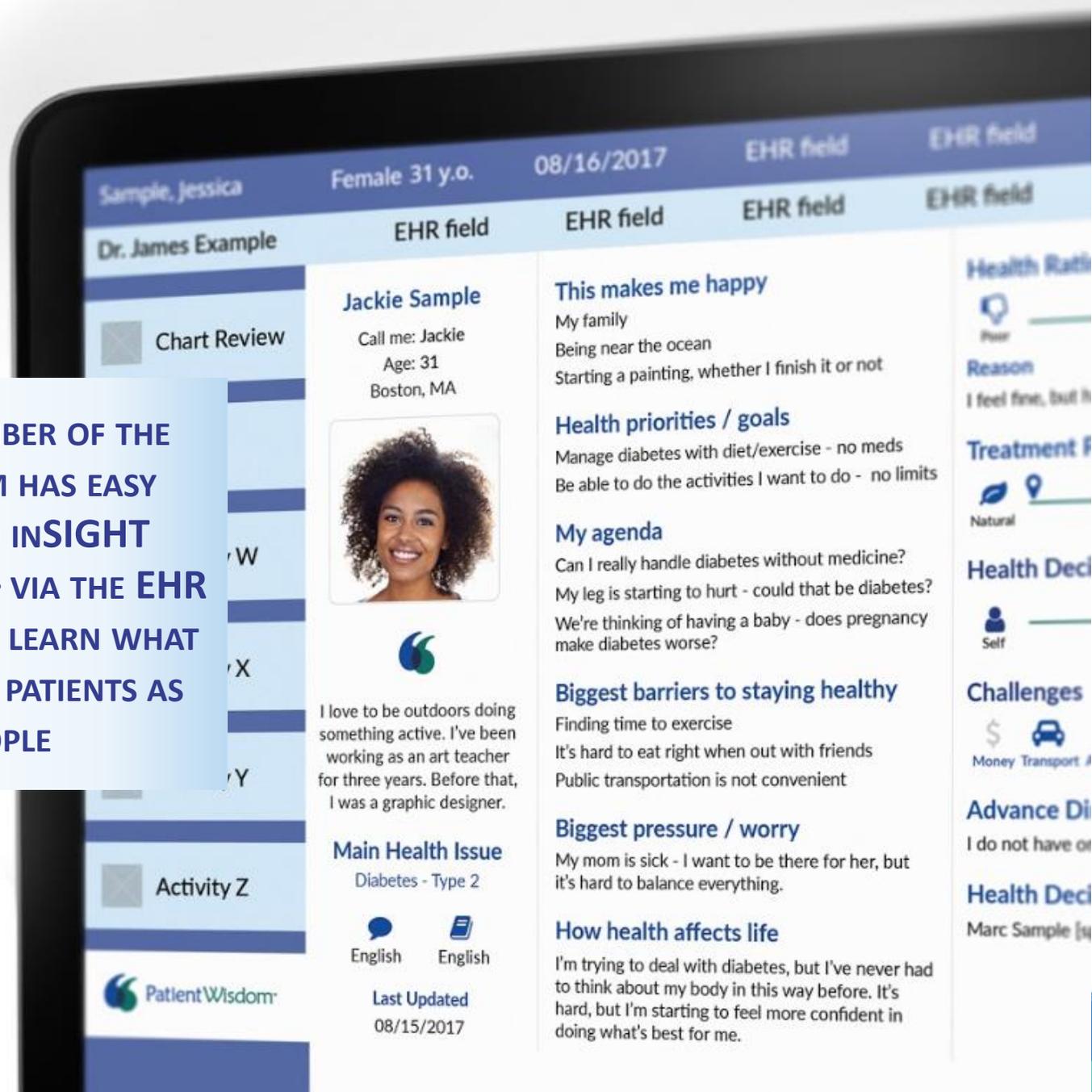
Patients, Families, Caregivers

AT VISIT



Care Team

EVERY MEMBER OF THE CARE TEAM HAS EASY ACCESS TO INSIGHT SUMMARIES – VIA THE EHR – TO QUICKLY LEARN WHAT MATTERS TO PATIENTS AS PEOPLE

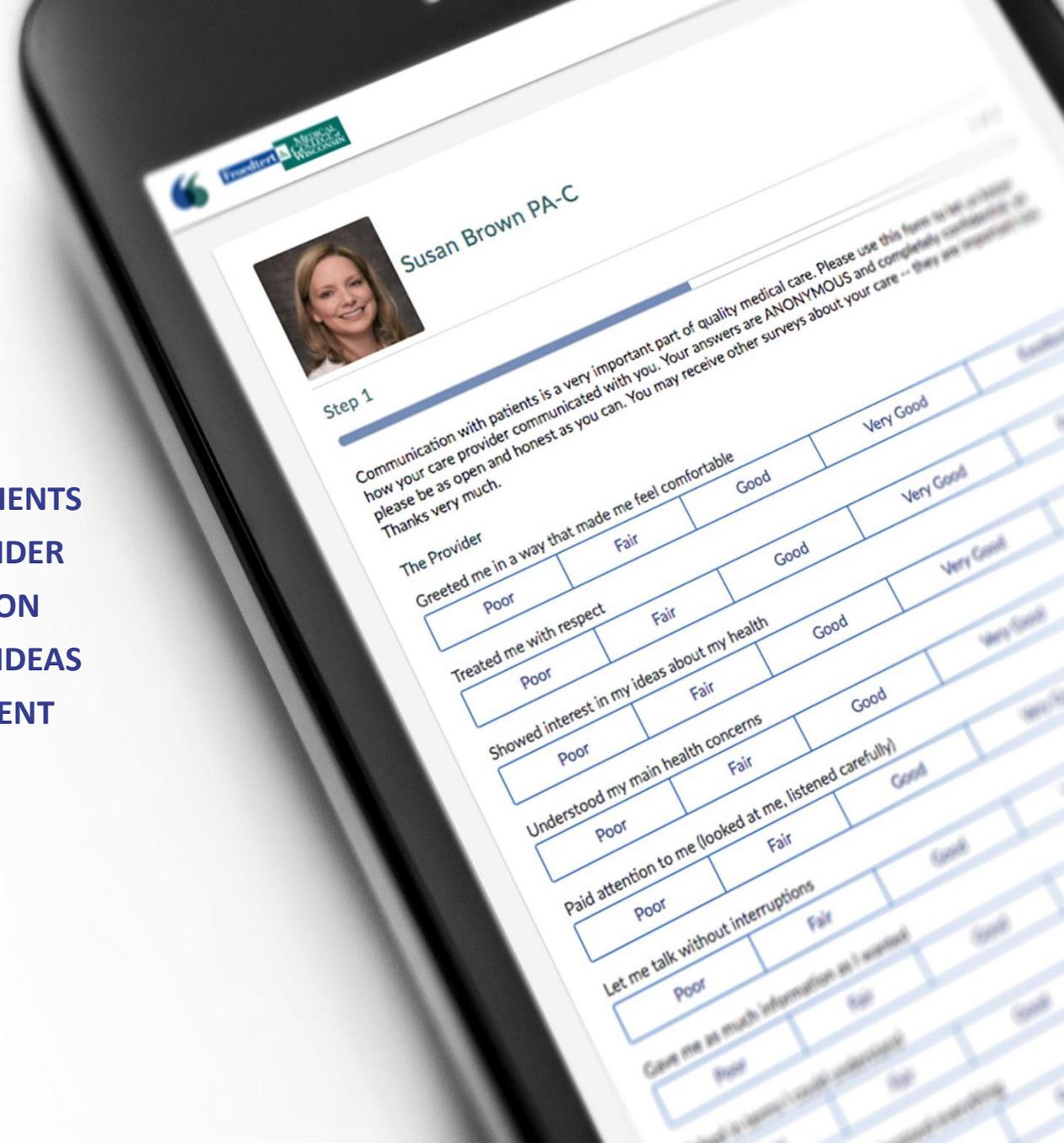


AFTER VISIT



Patients, Families, Caregivers

WE CAN PING PATIENTS
TO GAUGE PROVIDER
COMMUNICATION
AND/OR UPDATE IDEAS
FOR IMPROVEMENT

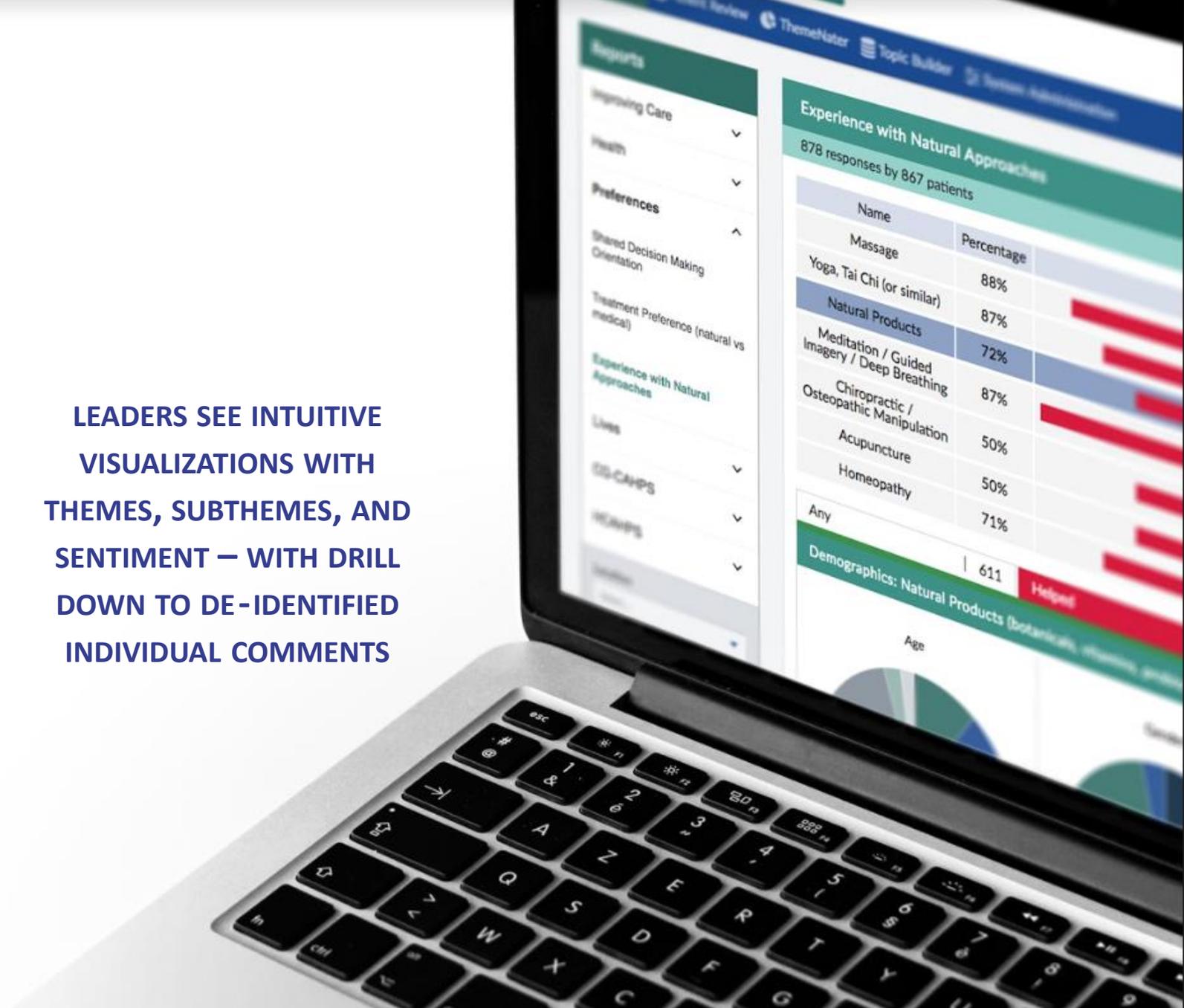


ACROSS VISITS



Health Organizations

LEADERS SEE INTUITIVE VISUALIZATIONS WITH THEMES, SUBTHEMES, AND SENTIMENT – WITH DRILL DOWN TO DE-IDENTIFIED INDIVIDUAL COMMENTS



Doing better without taking longer

< 20 seconds

time it takes for busy providers to read the inSIGHT summary before seeing a patient

82%

of providers confirm that PatientWisdom helps them know what's important to their patients

90%

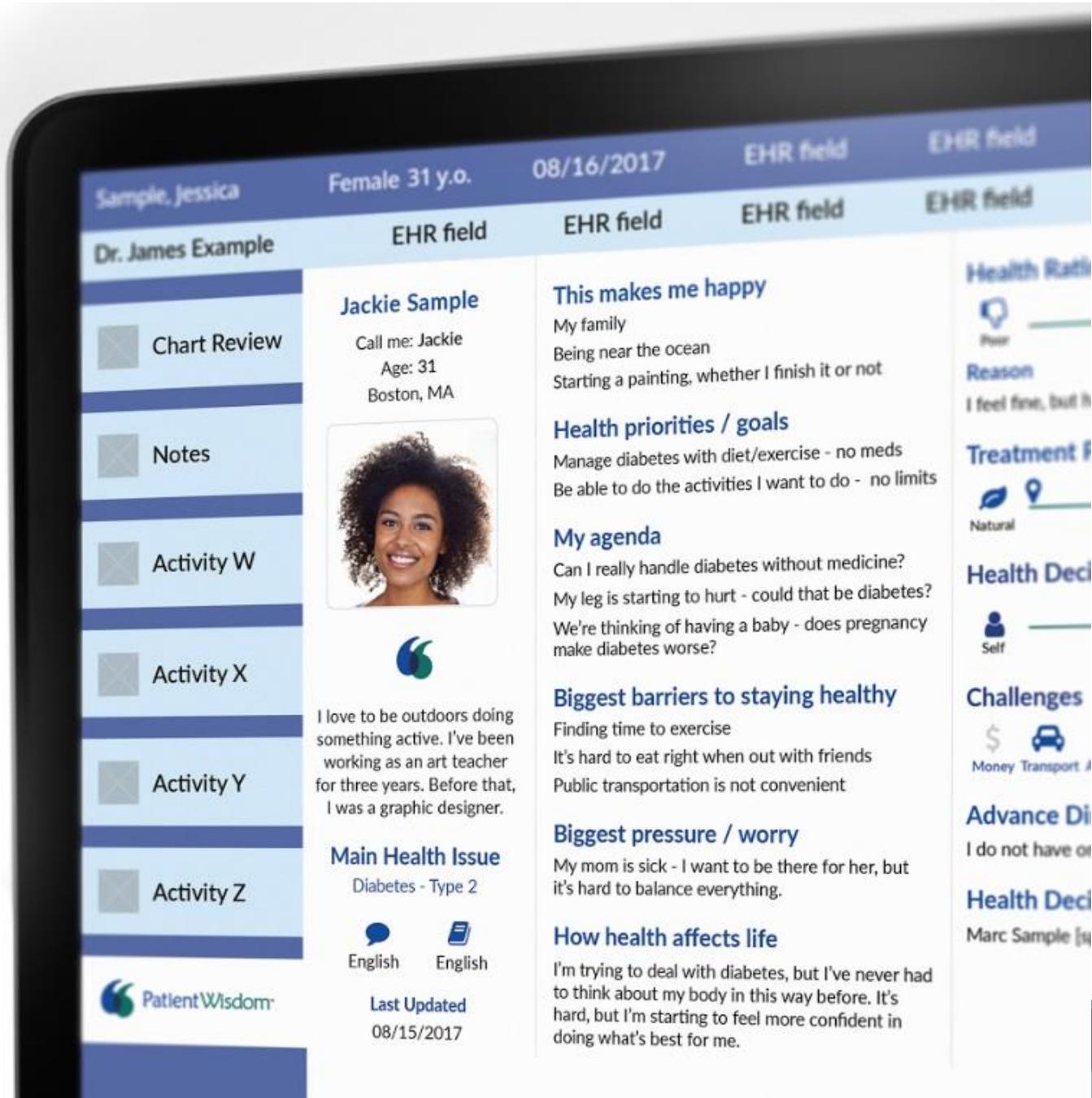
of patients say PatientWisdom improves communication with doctors who use it

95%

of visits using the inSIGHT summary rated as going 'extremely well', a marked improvement

10.7%

reduction in new patient no-show rates



Patient perspectives: The key to real transformation

FROM HEALTH TRANSACTIONS

Patients as cases

What's the matter with you?

Within the care setting

Burn-out in practice

Disconnected

TO HEALING RELATIONSHIPS

Patients as humans

What matters to you?

Beyond the care setting

Joy in practice

Engaged

**The key to improving
healthcare is to listen.
Really listen.**

*Dr. Donald Berwick, President Emeritus, Institute for
Healthcare Improvement; former administrator, CMS*

**We have to ask
ourselves this question:
What stories are we not
hearing?**

*Sachin H. Jain, Chief Medical Information
and Innovation Officer, Merck; now CEO, CareMore*

**Patient engagement is
the blockbuster drug
of the century.**

Leonard Kish, Digital Health Strategist

*Dr. Farzad Mostashari, Former Head,
Office of the National Coordinator for Health IT*

**Listen to your patient;
he is telling you
the diagnosis.**

*Sir William Osler, founder
The Johns Hopkins Hospital*

Questions & Answers



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Beth Lown, MD
Medical Director
The Schwartz Center for Compassionate Healthcare

Type your questions in the Questions Pane on your screen at any time.



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today's session.**

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electronic survey upon exiting today's program.**

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