# Empowering and Engaging Women: Patient-Centered Care

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From SACIM Executive Summary

- Core principle: Engage and empower consumers; life course perspective
- Strategies:
  - 1C: new care models; maternity medical homes
  - 1D: mental/behavioral health
  - 2C: quality
  - 3A: social marketing
  - 4B: patient-centered, community-based health teams
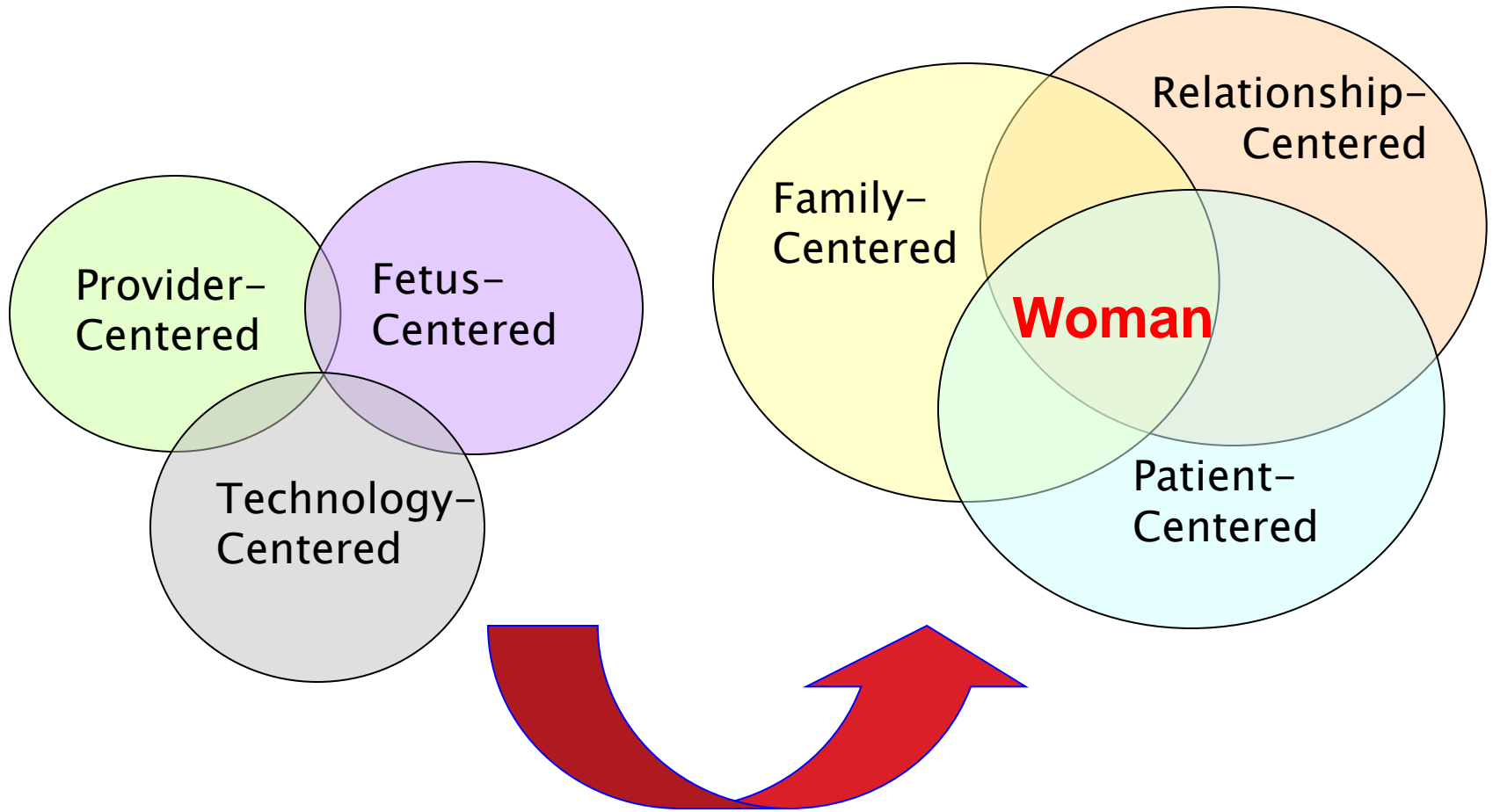
Patient-Centered Care:
A Story
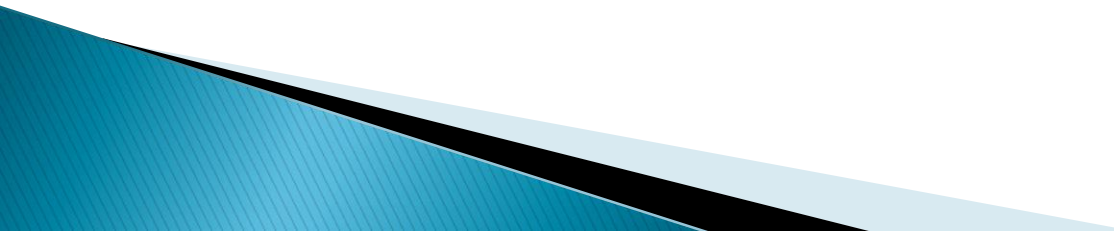
What Does Patient-Centered Really Mean?

- ▸ Understanding the experience
- ▸ Understanding the context
- ▸ Finding common ground
- ▸ Prevention and Wellness
- ▸ Longitudinal Relationships

- ▸ Patient-Centered Medicine: Transforming the Clinical Method (Stewart & Brown, 2003)

Woman-Centered Care

Provider-Centered

Fetus-Centered

Technology-Centered

Family-Centered

Relationship-Centered

Woman

Patient-Centered

Engaging and Empowering:
From Patient-Centered to Woman-Centered

Problems

- Teen
- Unplanned pregnancy
- Late to care
- Obesity
- Complex family history of mental and physical illness, ?genetic component
- ?PTSD
- Poverty

Strengths

- Teen
- Multigenerational connections
- Supportive partner
- Still in school
- Willing to share her story
- Family's community ties (church)
- CHC ties

Engaging and Empowering: Community Health Centers, Community-Based Teams (4B)

Patient-Centered Roots

- Located in communities
  - Accessible
- Consumer participation on board
  - Patient voice
- Staff from local communities
  - Cultural "brokers"

Challenges for Future

- Funding cuts
  - Grants
  - Public insurance
- Recruitment/retention
  - Management
  - Health providers/teams
- Infrastructure
  - IT (3C)

Engaging and Empowering: Is a Patient-Centered Medical Home (1C) Really Patient-Centered?

- Six "standards"
  1. Enhance Access and Continuity
  2. Identify and Manage Patient Populations
  3. Plan and Manage Care
  4. Provide Self-Care Support and Community Resources
  5. Track and Coordinate Care
  6. Measure and Improve Performance

Group Care (1C)

- "Engaged, empowered women in labor"
- Group facilitation—a learned skill, different from traditional physician style
- Women speak up and learn from each other
- Alternatives: low literacy, mindfulness training, transition to postpartum
- Challenges: The "Well Mom" part of well baby groups

Centering
Healthcare
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Engaging and Empowering:
Can Evidence-Based Maternity Care be Patient-Centered?

Over-used EBM (technology)	Under-used EBM (human)

Over-used EBM (technology)

- Induction
  - "Elective"
  - "Indicated"
- Epidural
  - "Early"
- Cesarean
  - "Maternal request"
  - "Failure to progress"
 - Breech
- AROM
- Episiotomy

Under-used EBM (human)

- Labor companion
  - ?Train a female family member
- Non-supine positions for birth
- Early skin-to-skin contact

Engaging and Empowering: Patient-Centered Care and Behavioral Health (1D)

- Behavioral Change
  - Obesity
  - Mental Health
  - "Adherence" (appointments, medications, testing)
- Integrated Behavioral Health teams
- Motivational Interviewing skills
- Patient-Centered Clinical Method
- Decision Support Tools
- Longitudinal relationship and trust
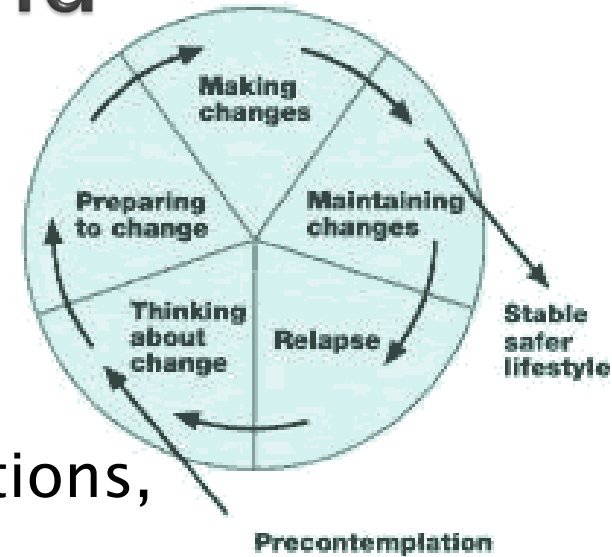
Engaging and Empowering: How Can Quality Improvement (2C) Be More Patient-Centered?

- Example: IHI "Bundles"
  - "*a focus on mother and family as the locus of control*"
  - Focus on processes that "manage" L&D; error reduction; care team communication
    - essential, yet insufficient
- Patient-centeredness not yet central
- Are our quality collaboratives really engaging and empowering women and families?

Massachusetts
Perinatal Quality Collaborative

Engaging and Empowering: Longitudinal Patient-centered Care

- Primary care across generations
- Linkages across reproductive life spectrum
- Multigenerational
  ◦ Life course perspective
- **Well woman care starts with well-girl care**

http://www.girleffect.org/why-girls/#&panel1-1
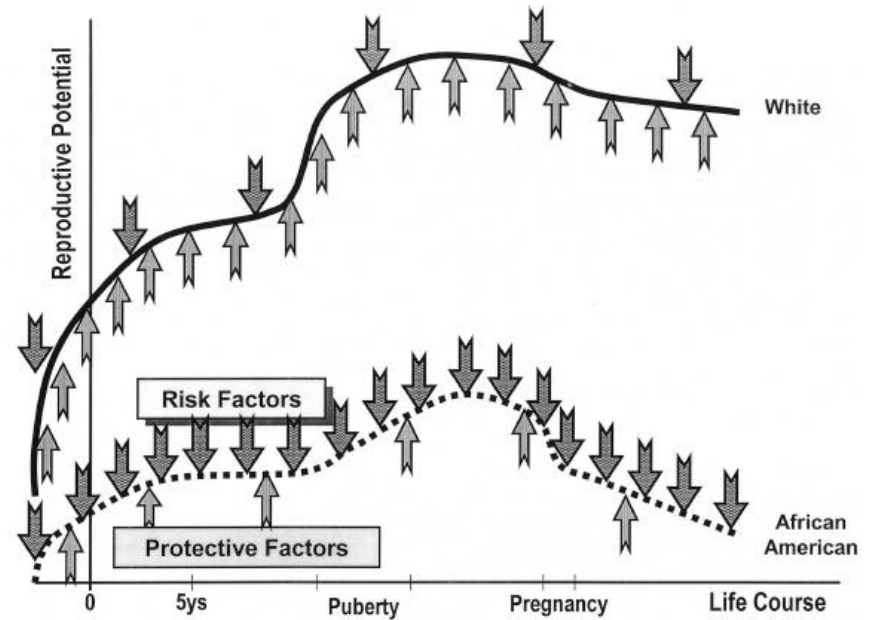
Woman-Centered Care: Case

- PCMH: Team-based care (1C)
  - Community-based workers (4B)
  - Outreach (3A)
  - Longitudinal relationship (life course)
- Quality Outcomes (2C)
  - Include mothers/families in developing these
  - Tracking (what happens to a family after a loss)
- Self-assessment/empowerment tools
  - Group care tools (1C) &/or motivational interviewing (1D)
  - Birth plans & reproductive life plan
  - Parenting support through childhood/adolescence (1C,D)
- Multifactorial solutions (4)
  - Poverty reduction, healthy food sources, mental health services