Patient Involvement

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Objectives of WP9

• Gain insight into patient involvement
• Conclude on success factors of increasing patient involvement
• Identify how patient involvement can contribute to better integration of care
# Methodology

<table>
<thead>
<tr>
<th>Method</th>
<th>N.</th>
<th>SDM</th>
<th>Patient education</th>
<th>Self Management</th>
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</thead>
<tbody>
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<td>Questionnaire</td>
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<td>Focus Groups</td>
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<td></td>
<td>- 9 HP</td>
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<td>- 6 patients</td>
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<td>Family medicine</td>
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<td></td>
<td>- 6 HP</td>
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<td>- 3 patients</td>
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<tr>
<td></td>
<td>142 with chronic conditions</td>
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Results

• Age, socioeconomical status and severity of the condition has an influence on the willingness of participation

• There is no correlation between willingness and experience of participation
Results

• No distinct concepts of PI from the patients’ perspective
• Health literacy has to be acknowledged as a primary prerequisite for PI
• Holistic approach of patient education is necessary to prepare the patient for self-managing his condition
• HP education does only insufficiently reflect the patients’ need for PI
Prerequisites for PI

- **Patients**
  - Health literacy central prerequisite
  - “Translation” of relevant information for the patients
  - Time!
  - Consequences of the decision to be made!
  - Trust!

- **Health Professionals**
  - Time!
  - Communication with the patient
  - Team structure
  - Legal framework
• DISCUSSION!
References


Patient Centeredness

Model of patient centeredness by Mead and Bower (2000)
Model of PI

Policy Context
- Health policy
  - Availability of health information
  - Educational level
  - Availability of health care
  - Legal framework

Professional Context
- Professional self-concept
  - Professional norms
  - Level of interdisciplinary work
  - Interdisciplinary knowledge

Personal Factors
- Attitudes and Values
- Personality
- Gender
- Ethnicity
- Age

Information and Education Process
- General prerequisites
  - Reading ability
  - Numeracy
  - Level of education
  - Communication ability

Health Management and Intervention
- Developed Knowledge and Capability
  - General knowledge on health factors
  - Specific health knowledge
  - Health skills
  - Self-efficacy

Improved Health Literacy
- Professional norms
  - Level of interdisciplinary work
  - Interdisciplinary knowledge

Health behaviour
- Improved health outcomes
  - Lower long-term level of chronic condition
  - Lower level of multimorbidity
  - Lower level of complications
  - Lower level of mortality

Activity and Participation
- Increased level of activity
  - Increased social participation
  - Increased quality of life

PATIENT
- Personal Factors
  - Attitude and expectations
  - Gender
  - Ethnicity
  - Age
  - State of health
  - Actual problem

Process
- Health system
  - Performance incentives
  - Organization and amount of payment
  - General framework of healthcare provision
  - Effects of developing health system

Organisational Context
- Time limitations
- Workload pressure
- Physical limitation
- Process quality

Improved Health Outcomes