

# Putting people at the heart of health care, research advances definition of person-centered care

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Putting people at the center of their own health care may seem intuitive, but it is an approach that is not widely practiced in the medical community. An interprofessional panel of eldercare experts convened by the American Geriatrics Society (AGS), in collaboration with the University of Southern California (USC) and with support from The SCAN Foundation, today released findings from a research project to better define 'person-centered care' and its key elements. This innovative approach to health care puts individual values and preferences at the heart of care decisions, measuring success by attention to people's health and life goals. Research findings, an expert panel statement, and a special commentary published in the *Journal of the American Geriatrics Society* add clarity to the characteristics of person-centered care, which has lacked a cohesive definition even as its prominence in research and health policy is growing.

"For too long, our medical system has focused on treatment of illnesses rather than on care of a person with illnesses," explained project Principal Investigator Laura Mosqueda, MD, FAAFP, AGSF, Chair, Department of Family Medicine, Professor of Family Medicine and Gerontology, Keck School of Medicine of USC. "The values espoused in person-centered care remind us of the importance of eliciting and acting on our patients' preferences and goals. We now have a clearer vision of how to translate the aspiration of person-centered care into a reality."

Added Bruce A. Chernof, MD, FACP, President and Chief Executive Officer of The SCAN Foundation, "Person-centered care is essential for [older adults](#) with [chronic health conditions](#) and functional limitations who need well-coordinated, team-based care. This concept shifts the success vision of [health care](#) on the things that matter most to people—how they are living every day with complex needs and achieving their personal goals. Person-centered care defines quality and value beyond technical measures of care toward dignity, respect of personal choices, and life outcomes achieved."

As outlined by the AGS [expert panel](#), a person-centered approach begins by gathering specific information about a person's preferences in light of health circumstances, with input from family members and other caregivers if the person wishes. Added to a comprehensive health and functional assessment, this information is used to help a person shape and articulate his or her health and life goals. These goals are driven first and foremost by how a person wants to function and what he or she envisions for future well-being.

To arrive at its definition, the expert panel reviewed research conducted by Dr. Mosqueda; Alexis M. Coulourides Kogan, PhD, Keck School of Medicine of USC; and Kathleen Wilber, PhD, USC Davis School of Gerontology, including a comprehensive literature review supplemented by interviews with leaders of community-based healthcare and social service organizations that reported providing person-centered care for older adults. From this work, researchers observed that:

- Organizations often define and operationalize person-centered care in unique ways. For some, it is focused on creating "individualized plans" to meet client and family needs. For others, it reflects the belief that person-centered care is "not just a program but a culture...embedded in practice and mission-driven."

- Even in light of their differences, organizations employing person-centered care remain strongly committed to the approach in more than just words. It requires, as several interviewees noted, significant time and resources, but the effects extend across the health system: "Staff are able to build trust and a relationship with clients, clients get better, staff feel good about client outcomes," one respondent observed.

"This research will help healthcare professionals and older adults understand both how and why success entails fidelity to certain key elements of person-centered approaches," noted Steven R. Counsell, MD, AGSF, AGS President. "The findings highlighted in the four companion papers—the literature review on person-centered care, report on qualitative research findings, expert panel statement defining person-centered care and its essential elements, and special commentary by The SCAN Foundation—help to advance person-centered care as a field. We're confident this work will help health systems and providers implement person-centered practices with the goal of improving care quality for all, especially older adults with complex [health](#) needs."

The articles, published online in the *Journal of the American Geriatrics Society*, are free and open access at [GeriatricsCareOnline.org](https://www.geriatricscareonline.org), the online home for AGS resources and publications.

**More information:** [geriatricscareonline.org/Productional-elements/CL020](https://www.geriatricscareonline.org/Productional-elements/CL020)

Provided by American Geriatrics Society

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