Shared Principles of Primary Care: A PCPCC Webinar

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Panelists

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President & Board Chair
Family Medicine For America’s Health
Shared Principles of Primary Care

- Patient Centered
- Coordinated & Integrated
- Continuous
- Comprehensive & Equitable
- High Value
- Team Based & Collaborative
- Accessible
Question 1

What is the purpose of the Shared Principles?
Question 2

What is the history of the Shared Principles?

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Steering Committee Members

- Christine Bechtel, MA - President & Strategist, X4 Health – Co-Chair of Steering Committee
- Ted Epperly, MD – Family Medicine for America’s Health - Co-Chair of Steering Committee
- Julie Schilz, BSN, MBA – Anthem - Co-Chair of Steering Committee
- Michael Barr, MD - National Committee for Quality Assurance
- Asaf Bitton, MD, MPH – Ariadne Labs
- Edward Bujold, MD - KPN Health, Inc.
- Anshu Choudhri, MHS - Blue Cross & Blue Shield Association
- Anne Edwards, MD - American Academy of Pediatricians
- Shari Erickson, MPH - American College of Physicians
- Rebecca Etz, PhD - Virginia Commonwealth University
- Kylanne Green, NP - URAC
- Kevin Grumbach, MD - University of California San Francisco
- Jeffrey Halbstein-Harris - Patient Advocate
- Judith Haber, PhD, APRN - New York University
Steering Committee Members

- James (Larry) Holly, MD - Southeast Texas Medical Associates
- Polly Kurtz, MS, MBA - Collaborative Family Healthcare Association
- Naomi Kuznets, PhD – AAAHC Institute for Quality Improvement
- Belle Lerner, MA – AAAHC Institute for Quality Improvement
- Rosi Sweeney- Patient Centered Primary Care Collaborative
- Lisa Dulsky Watkins, MD - Milbank Memorial Fund
- Jean Malouin, MD, MPH – University of Michigan Medical Group
- Rebecca Malouin, PhD, MPH - Michigan State University College of Human Medicine
- Ryan McBride, MPP - American Osteopathic Association
- Amy Mullins, MD, CPE - American Academy of Family Physicians
- Malachi O’Connor, PhD – CFAR. Staff Support
- Diane Padden, PhD, CRNP - American Academy of Nurse Practitioners
- Brenda Sharpe – Reach Healthcare Foundation
- Lisa Stewart, MA - Patient-Centered Outcomes Research Institute
- Audrey Whetsell, MA - Resource Partners LLC
Question 3

How are the Shared Principles different than the 2007 Joint Principles of the Patient Centered Medical Home?
Question 4

What does each Shared Principle mean?
Person & Family Centered

- Primary care is **focused on the whole person** - their physical, emotional, psychological and spiritual wellbeing, as well as cultural, linguistic and social needs
- Primary care is grounded in **mutually beneficial partnerships among clinicians, staff, individuals and their families**, as equal members of the care team. **Care delivery is customized** based on individual and family strengths, preferences, values, goals and experiences using strategies such as care planning and shared decision making
- Individuals are supported in determining how their **family or other care partners may be involved in decision making and care**
- There are **opportunities for individuals and their families to shape the design, operation and evaluation of care delivery**

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Continuous

- Dynamic, trusted, respectful and enduring relationships between individuals, families and their clinical team members are hallmarks of primary care
- There is **continuity in relationships** and in knowledge of the individual and their family/care partners that **provides perspective and context** throughout all stages of life including end of life care.

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Comprehensive & Equitable

• Primary care **addresses the whole-person with appropriate clinical and supportive services that include acute, chronic and preventive care, behavioral and mental health, oral health, health promotion and more.** Each primary care practice will decide how to provide these services in their clinics and/or in collaboration with other clinicians outside the clinic.

• Primary care providers **seek out the impact of social determinants of health and societal inequities. Care delivery is tailored accordingly.**

• Primary care practices **partner with health and community-based organizations to promote population health and health equity**, including making inequities visible and identifying avenues for solution.

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Team Based & Collaborative

- Interdisciplinary teams, including individuals and families, work collaboratively and dynamically toward a common goal. The services they provide and the coordinated manner in which they work together are synergistic to better health.
- Health care professional members of the team are trained to work together at the top of their skill set, according to clearly defined roles and responsibilities. They are also trained in leadership skills, as well as how to partner with individuals and families, based on their priorities and needs.

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Coordinated & Integrated

- Primary care integrates the activities of those involved in an individual’s care, across settings and services
- Primary care proactively communicates across the spectrum of care and collaborators, including individuals and their families/care partners
- Primary care helps individuals and families/care partners navigate the guidance and recommendations they receive from other clinicians and professionals, including supporting and respecting those who want to facilitate their own care coordination
- Primary care is actively engaged in transitions of care to achieve better health and seamless care delivery across the life span

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Primary care is readily accessible, both in person and virtually for all individuals regardless of linguistic, literacy, socioeconomic, cognitive or physical barriers. As the first source of care, clinicians and staff are available and responsive when, where and how individuals and families need them. Primary care facilitates access to the broader health care system, acting as a gateway to high-value care and community resources. Primary care provides individuals with easy, routine access to their health information.

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High-Value

• Primary care achieves excellent, **equitable outcomes for individuals and families**, including using health care resources wisely and considering costs to patients, payers and the system.
• Primary care practices **employ a systematic approach to measuring, reporting and improving population health, quality, safety and health equity**, including partnering with individuals, families and community groups.
• Primary care practices **deliver exceptionally positive experiences** for individuals, families, staff and clinicians.

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Question 5

What can my organization do to advance the Shared Principles?

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Question 6

What are the policy implications and opportunities created by the Shared Principles?

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Question 7

What are the next steps for the Shared Principles and PCPCC?

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Question 8

How can I add my organization’s name to the list of signers?

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Thank You!

Comments & Questions

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