

Conference abstract

Patient priorities in coordinated care: a literature review to identify patients' preferences

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Abstract

Background: Delivering efficient healthcare within limited budgets requires an understanding of patient priorities. Designing services that are sensitive to patients' preferences in the context of limited resources may require policy and decision-makers to choose between attributes. Aligning clinical practice and health policy with patient preferences will improve the effectiveness of health interventions. Coordinated care aims to achieve higher-quality care, lower costs and greater patient satisfaction. Heterogeneity within preferences due to racial and ethnic disparities, age or illness has to be documented and considered in the design of healthcare services. Conjoint analysis or discrete choice studies can be used to elicit preferences for interventions or technologies.

Research question: This study intends to provide health policy and decision-makers with a literature review of patients' priorities in the relative value of coordinated care. In order to promote coordinated care, policy-makers need to understand patients' priorities. Therefore this study aims to use a literature review to assess patient preferences.

Method: As a research in the database PubMed has shown the available literature analyzing patient-centered outcomes in coordinated care is very limited. The searches for '(patient-centered coordinated care) and (discrete choice)', '(patient-centered coordinated care) and (conjoint analysis)', '(patient-centered medical home) and (discrete choice)' as well as '(patient-centered medical home) and (conjoint analysis)' all ended up in no results found. Merely the searches for '(patient-centered care) and (discrete choice)' and the one for '(patient-centered care) and (conjoint analysis)' were successful.

Results: The term 'patient preferences' still lacks a consistent definition; despite this, there appears to be convergence in the view that patient preferences are statements made by individuals regarding their needs, values and expectations and the relative importance of treatment properties. Therefore these preferences refer to the individual evaluation of dimensions of health outcomes. Based on the existing literature, coordinated care can be differentiated into attributes, such as: organization of care, patient self-management, interpersonal care, and technical care.

Conclusion: Patient-centered outcomes will provide objective information about the impact on patient involvement, the experiences, and the needs and wants of patients. Patient preference data will help insurers, policy-makers and others to promote patient-centered coordinated care as the new standard of primary care.

Keywords

patient preferences, literature review
