

Interventions for providers to promote a patient-centred approach in clinical consultation

Review question

What are the effects of interventions for healthcare providers that aim to promote patient-centred care (PCC) approaches in clinical consultations?

What is patient-centred care?

Patient-centred care can be defined as including the following two main features:

- Healthcare providers share control of consultations, decisions and management with patients and/or
- Healthcare providers focus on the patient as a person, rather than solely on the disease.

Key findings

- Interventions to promote patient-centred care are effective in transferring patient-centred skills to providers
- Short-term training (< 10 hours) is as successful as longer training
- The effects on patient satisfaction, health behaviour and health status are mixed
- Complex interventions directed at providers and patients that include condition-specific educational materials may have beneficial effects on patient health behaviour and health status.

This summary is relevant for:

Decision makers and clinicians interested in patient-centred care

This summary includes:

- Key findings from research based on a systematic review (p 1)
- Considerations about the relevance of this research to policy makers and clinicians (p 2)
- A more detailed description of the research (p 3)

Not included:

- Additional evidence
- Detailed descriptions of personalised risk communication or how to implement the intervention in practice
- Recommendations

What is a systematic review?

A systematic review aims to locate, appraise and synthesise all of the available evidence related to a specific research question. Authors adopt rigorous methods to minimise bias as a way of producing reliable findings with the ultimate goal of making the evidence more useful for practice. See navigatingeffectivetreatment.org.au for more information

Full citation for this review:

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Relevance to the health care context in Victoria, Australia

The broader policy and clinical context

Patient-centred care is an integral part of the Australian healthcare landscape. This is evidenced by [The Australian Safety and Quality Framework for Health Care](#), where a central plank is the provision of consumer-centred care. The Australian Commission on Safety and Quality in Health Care has a program that focusses on fostering [patient-centred and partnership approaches to care](#). Locally, the concept of patient-centred care underpins the Victorian Department of Health's [Doing it with us not for us: Strategic direction 2010-13](#).

The populations and settings in which this is relevant

The results of this review apply to the training of primary care physicians and nurses in community and outpatient settings and are relevant to patients with general medical problems. The studies in this review were all conducted in high-income countries (with two in Australia) and as such are likely to be relevant to the Australian healthcare setting.

Implications for decision makers

Patient-centred care underpins Standard 2 (Partnering with Consumers) of the [National Safety and Quality Health Service Standards](#), to which Australian hospitals must comply. The Australian Commission on Safety and Quality in Health Care's [2010 discussion paper](#) provides practical examples, tools and resources that can be used by Australian healthcare organisations to facilitate a more patient-centred approach.

Implications for clinicians

In this review, specific interventions to improve patient-centred care mostly involved training of primary care physicians and nurses. This training can be less than 10 hours and is as effective as longer training. The Victorian Commission for Hospital Improvement's [Talking with Your Doctor](#) brochure, which aims to facilitate patient-centred care, provides examples of patient-centred approaches and can be given to patients to encourage participation in their health care encounters.

Related resources

Systematic reviews

- [Interventions for improving the adoption of shared decision making by healthcare professionals](#)
- [Cultural competence education for health professionals](#)
- [Family-centred care for hospitalised children aged 0-12 years](#)
- [Decision aids for people facing health treatment or screening decisions](#)

Evidence bulletins

- [Decision aids for people facing health treatment or screening decisions \[Evidence bulletin\]](#)

Background

Communication problems in health care may arise as a result of healthcare providers focussing on diseases and their management, rather than people, their lives and their problems. Patient-centred approaches to care delivery in the patient encounter are increasingly advocated by consumers and clinicians and incorporated into training for healthcare providers.

Information about this review

The authors of this systematic review conducted a detailed search of studies published up to June 2010. They used the following criteria to determine which studies to include:

Types of studies

- Randomised controlled trials

Participants

- All types of healthcare providers, including those training to qualify as healthcare providers

Types of intervention

- Any intervention directed at healthcare providers and intended to promote patient-centred care within clinical consultations was considered
- Patient-centred care was defined as including two main features
 - Healthcare providers share control of consultations, decisions and management with patients and/or
 - Healthcare providers focus on the patient as a person, rather than solely on the disease.
- Interventions were categorised as brief training (< 10 hours) or extensive training (≥ 10 hours)

Comparison

- Placebo patient-centred care or usual care

Outcomes

The following outcomes were examined:

- Consultation processes (including provider communication skills, consultation process measures)
- Patient satisfaction with care

- Health behaviour (such as concordance with care plans, attendance at follow up consultations and health service utilisation)
- Health status and wellbeing including physiological measures, clinical assessments, patient self-reports of symptom

Main results

This review identified and included 43 studies.

About the studies

Training interventions were directed at primary care physicians (general practitioners, internists, paediatricians or family doctors) or nurses practicing in community or hospital outpatient settings. Some studies trained specialists. Patients were predominantly adults with general medical problems.

Effects of patient-centred care skills training

- Interventions are largely successful in transferring new PCC skills to providers
- Short-term training (< 10 hours) is as successful as longer training
- Some evidence that improved PCC skills improve patient satisfaction
- There is modest support that multi-faceted interventions have an effect on health status and health behaviours, not found with training for providers alone
- Studies that measured health behaviours were mixed
- The combined estimate of the effect of interventions on patient satisfaction, health behaviour and health status were in the low to medium range
- Complex interventions directed at providers and patients that include condition-specific educational materials may have beneficial effects on health behaviour and health status.

What this review does not show

- More research is needed to directly test the effects of interventions aimed at providers only, compared with those aimed at patients and providers, with and without condition-specific educational materials.

This evidence bulletin draws on the format developed for SUPPORT summaries (for more information on SUPPORT summaries see www.supportsummaries.org).

Health Knowledge Network

The health knowledge network is the knowledge transfer arm of the Centre for Health Communication and Participation. The Centre is funded by the Quality, Safety and Patient Experience Branch, Department of Health, Victoria, Australia.

The Health Knowledge Network summarises reviews published by the Cochrane Consumers and Communication Review Group.

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