Patient-centered care in inpatient settings: what does it look like?
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Background
While patient-centered care (PCC) has been well described in outpatient settings, inpatient PCC has had less focus. Inpatient providers may focus more on disease than the person in the face of pressing biomedical concerns. In the inpatient setting, a patient-centered approach is important to understand individuals’ needs and experience of illness and hospital care. The objective of this study was to identify key inpatient PCC practices.

Methods
We conducted one-day ethnographic observations and semi-structured interviews of patients (n=19) and inpatient providers (n=26) on medical/surgical units at two US Department of Veterans Affairs medical centers. We identified practices congruent with and in contrast to PCC principles based on Hudon's conceptual framework. Three coders discussed observed examples and interviews to come to agreement on categorization of practices.

FINDINGS: We found practices 4 practices aligned with PCC principles: 1) Attending to patients’ disease and illness experience - providers communicated with patients about their current experience before attending to routine clinical tasks. 2) Establishing a common ground - providers helped patients understand their care, orienting them to clinical tasks. 3) Bringing biopsychosocial perspectives – providers learned about patients as individuals and incorporated personal histories into care. 4) Establishing a therapeutic alliance - providers treated patients with respect, establishing relationships despite limited communication capacity. We identified 3 practices that contrasted with PCC principles: 1) Failure to share power and responsibility - providers elevated rules and procedure over patients’ preferences, needs and concerns. 2) Failure to establish a common ground for practices - providers did not communicate about safety procedures thus delaying attention to patients’ immediate needs and 3) Whole person - providers failed to ascertain patient's life context to understand the origins of illness and plan for appropriate discharge.

Discussion
As healthcare systems move towards providing more PCC it is critical to understand how these principles apply to inpatient care. Our study provides exemplars of provider communication practices that are well aligned with PCC principles in contrast to those that focus on the disease and institutional procedures. Failure to attend to the whole person may result in missed opportunities to address root causes of critical health issues.