



SYNTHESIS OF THE STARFIELD SUMMIT III: MEANINGFUL MEASURES FOR PRIMARY CARE

As documented by Starfield and others, health care systems based on primary care have healthier populations, greater equity, and lower cost. However, current quality measures do not reflect most of the mechanisms hypothesized to provide this value. Incorrectly focused measurement and incentives risk burning out the workforce and diminishing the value of primary care for people and populations.

Starfield III brought together diverse stakeholders to grapple with understanding what matters in primary care, and how it can be measured. We began with advance work that included crowd-sourced surveys of nearly two thousand people, and five commissioned issue briefs. These efforts culminated in a 2½ day facilitated conversation among 70 national and international leaders.

By sharing personal, research and policy experiences, Starfield III participants surfaced multifaceted mechanisms by which primary care fosters health, healing and systemic value. We discovered that the apparent simplicity of primary care masks the complexity of integrating, personalizing, and prioritizing care for people and communities. We struggled to fit this interrelated complexity into usual reductionist classification systems that assume that the whole is merely the sum of its parts.

In post-conference analyses of notes and transcripts from small and large group discussion, we identified two complementary ways of understanding and assessing primary care:

First, building on principles from complexity science, we uncovered three simple rules that, when actualized together by patients and practices and supported by systems, describe the processes from which the outcomes of primary care emerge:

- Recognize and make sense of problems/opportunities through a life course perspective and being known (as an individual & as a member of family and community);
- Prioritize the problems/opportunities (for person & population at all stages of life);
- Try to generate some kind of connection, healing, or health.

The enactment of these apparently simple rules, over time, in ongoing relationships, may be one way that primary care leads to the emergence of better health and equity at sustainable cost.

Second, a parsimonious set of individual items, used as a set, rather than assessed individually, can focus attention and support on the mechanisms by which primary care provides value:

- Accessibility – includes availability as the first contact with the health care system
- Comprehensiveness – focusing on the whole person
- Integration – bringing together the biological and the biographical across acute and chronic illness, prevention, mental health, family
- Coordination – managing care across different clinicians and settings
- Relationship – being known, continuity of care, longitudinality (being together over time), sustained partnership, being present for key events, trust
- Advocacy (looking out for the person in fragmented health care or social systems)
- Family context, knowledge, engagement that informs and supports care
- Community context, knowledge, engagement; including social and environmental determinants
- Goal-oriented care, focused on what is important and meaningful for the patient in their life stage
- Disease, illness, and prevention management
- Patient enablement

These two ways of knowing and assessing primary care – simple rules from which complexity emerges, and a parsimonious set of items representing key mechanisms – can be used as a starting point to reduce measurement burden, and to focus attention on improving the means by which primary care provides value.

As a starting point for future work, the Table on the following page outlines these measures and suggests some related contextual and outcome measures that currently are being used. The Appendices depict specific measurement items for patient report, phrased for people getting care (Appendix A) or phrased in ways that don't require recent care to make sense (Appendix B).

Table: A Parsimonious Approach to Measuring what Matters from Primary Care

Domain	Measurement Item ^{1,2 *}
3 SIMPLE RULES, THAT TOGETHER LEAD TO EFFECTIVE, PERSONALIZED CARE ^a	
Recognize and make sense of problems/opportunities through a life course perspective and being known (as an individual & as a member of family and community)	This health care visit recognized what was most important to me.
Prioritize the problems/opportunities (for person & population at all stages of life)	This health care visit, I was known as a person.
Try to generate some kind of connection, healing, or health	This health care visit helped me.
Summary assessment for clinicians to assess their sense of their ability and environmental/system support for doing what matters:	(Asked of clinicians): In what percentage of your visits do you get to follow the 3 rules?
DOMAINS OF KEY PRIMARY CARE MECHANISMS	
Accessible (availability and first contact with the health care system)	The practice makes it easy for me to get care.
Comprehensive (whole person [vs disease]) focus.	This practice is able to provide most of my care.
Integrated (bringing together the biological and the biographical across acute and chronic illness, prevention, mental health, family)	My doctor considers all of the factors that affect my health in caring for me.
Coordinated (manage care across different clinicians and settings)	My practice coordinates the care I get from multiple places.
Relationship (developing personal connection as well as delivering commodities of care)	This doctor and practice know me as a person.
Continuity (multiple domains: % of visits with same clinician, interpersonal, chronological, geographic, interdisciplinary, informational)	(Many existing continuity measures, e.g. Bice-Boxerman, among many options)
Longitudinality (being together over time)	How many years have you known this doctor?__
Present for key events (available at critical health & life events, e.g. births, deaths, hospitalizations...)	My doctor and I have been through a lot together
Trust	Sometimes I don't trust this practice.*
Advocacy (looking out for the person in fragmented health care or social systems)	My doctor and practice stand up for me when I need something.
Family context and engagement (knowledge of family influences care; focus on family as unit of care)	The care I get takes into account knowledge of my family.
Community context and engagement (social & environmental determinants of health)	The care I get in this practice uses knowledge of my community.
Goal-oriented care	My care here meets <i>my</i> goals.
Disease, illness, and prevention (health behavior change, immunization, screening, chemoprevention) management	Over time, my practice helps me stay healthy.
OUTCOMES	
Self-reported healing or health	Over time, this practice helps me to heal or to be healthier.
Patient's ability to get on with things that are important in their lives, and to understand and manage their illness.	Patient Enablement Index (6 items)
Self-reported health status	How is your health compared to other people your age?
Health care use. Mortality (change over time)	(Existing measures of costs of care, avoidable hospitalizations, re-hospitalizations, mortality rate)

a Analogous to how the complex flocking behavior of birds can be described by 3 simple rules, the complex personal and population outcomes of primary care emerge from the interaction of apparently simple intention and action over time.

1 Phrased to be asked of the patient. Also could be asked in general for the population, e.g. instead of: "In this healthcare visit what was most important to me was recognized," say: "In my health care what is most important to me almost always is recognized."

2 Response scale: 1. Definitely, 2. Mostly, 3. Somewhat, 4. Not at all.

* Reversed scored item.

Appendix A: Patient-Report Items Phrased for People Getting Care

For each item, choose the response that best fits your experience	Response
3 SIMPLE RULES, THAT TOGETHER LEAD TO EFFECTIVE, PERSONALIZED CARE	
This health care visit, I was known as a person.	Definitely Mostly Somewhat Not at all
This health care visit recognized what was most important to me.	Definitely Mostly Somewhat Not at all
This health care visit really helped me.	Definitely Mostly Somewhat Not at all
(Asked of clinicians): In what percentage of your visits do you get to follow these 3 simple rules of primary care?	(% for each of the items above)
HOW PRIMARY CARE WORKS	
The practice makes it easy for me to get care.	Definitely Mostly Somewhat Not at all
This practice is able to provide most of my care.	Definitely Mostly Somewhat Not at all
In caring for me, my doctor considers all of the factors that affect my health.	Definitely Mostly Somewhat Not at all
My practice coordinates the care I get from multiple places.	Definitely Mostly Somewhat Not at all
This doctor or practice know me as a person.	Definitely Mostly Somewhat Not at all
My doctor and I have been through a lot together	Definitely Mostly Somewhat Not at all
Sometimes I don't trust this practice.	Definitely Mostly Somewhat Not at all
My doctor or practice stands up for me.	Definitely Mostly Somewhat Not at all
The care I get takes into account knowledge of my family.	Definitely Mostly Somewhat Not at all
The care I get in this practice is informed by knowledge of my community.	Definitely Mostly Somewhat Not at all
Over time, this practice helps me to meet my goals.	Definitely Mostly Somewhat Not at all
Over time, my practice helps me stay healthy.	Definitely Mostly Somewhat Not at all
How many years have you known this doctor?	_____ (number of years)
OUTCOMES	
Over time, this practice helps me to heal or to be healthier	Definitely Mostly Somewhat Not at all
As a result of your visit to the doctor today, do you feel you are:	
able to cope with life	Much better Better Same Less
able to understand your illness	Much better Better Same Less
able to cope with your illness	Much better Better Same Less
able to keep yourself healthy	Much better Better Same Less
confident about your health	Much more More Same Less
able to help yourself	Much more More Same Less
How is your health compared to other people your age?	Excellent Mostly good Good Fair Poor

Appendix B: Patient-Report Items Phrased in Ways that Don't Require Recent Care

For each item, choose the response that best fits your experience	Response
3 SIMPLE RULES, THAT TOGETHER LEAD TO EFFECTIVE, PERSONALIZED CARE	
My primary care knows me as a person.	Definitely Mostly Somewhat Not at all
My primary care recognizes what is most important to me.	Definitely Mostly Somewhat Not at all
My primary care helps me to feel connection, healing, or health.	Definitely Mostly Somewhat Not at all
(Asked of clinicians): In what percentage of your visits do you get to follow these 3 simple rules of primary care?	(% for each of the items above)
HOW PRIMARY CARE WORKS	
My practice makes it easy for me to get care.	Definitely Mostly Somewhat Not at all
My practice is able to provide most of my care.	Definitely Mostly Somewhat Not at all
In caring for me, my doctor considers all of the factors that affect my health.	Definitely Mostly Somewhat Not at all
My practice coordinates the care I get from multiple places.	Definitely Mostly Somewhat Not at all
My doctor or practice know me as a person.	Definitely Mostly Somewhat Not at all
My doctor and I have been through a lot together	Definitely Mostly Somewhat Not at all
Sometimes I don't trust my practice.	Definitely Mostly Somewhat Not at all
My doctor or practice stand up for me.	Definitely Mostly Somewhat Not at all
The care I get takes into account knowledge of my family.	Definitely Mostly Somewhat Not at all
The care I get in this practice is informed by knowledge of my community.	Definitely Mostly Somewhat Not at all
Over time, this practice helps me to meet my goals.	Definitely Mostly Somewhat Not at all
Over time, my practice helps me stay healthy.	Definitely Mostly Somewhat Not at all
How many years have you known your doctor?	_____ (number of years)
OUTCOMES	
Over time, my practice helps me to heal or to be healthier	Definitely Mostly Somewhat Not at all
As a result of your health care, do you feel you are:	
able to cope with life	Much better Better Same Less
able to understand your illness	Much better Better Same Less
able to cope with your illness	Much better Better Same Less
able to keep yourself healthy	Much better Better Same Less
confident about your health	Much more More Same Less
able to help yourself	Much more More Same Less
How is your health compared to other people your age?	Excellent Mostly good Good Fair Poor