



UNIT I - SECTION 4

**PERSON-CENTERED PRACTICE**  
INSTRUCTOR'S GUIDE

## 1. Goals

- Goal 1: To introduce person centered care (PCC) as the focus for the course on human dynamics of hearing loss
- Goal 2: To review the history of the medical model and explore reasons why audiology is shifting away from this model into more relationship centered practice
- Goal 3: To review the tenets of person centered care (PCC) and highlight how it differs from the traditional medical model
- Goal 4: To reflect on how patient centered care practice revolves around building successful relationships between clinician and patients, and is therefore often referred to as relationship centered care, (RCC), or person/relationship centered care (PRCC)
- Goal 5: To reflect on how patients and audiologists benefit when PCC is practiced

## 2. Concepts to Master

- a. Our methods are the expression of our philosophy of audiology.
- b. Patients value relationships with practitioners who listen and address their needs.
- c. Relationship centered care emphasizes the centrality of the patient's needs.

## 3. Reading

- a. Erdman, Sue Ann, The biopsychosocial approach in patient- and relationship-centered care: Implications for Audiologic Counseling. In: Montano, Joseph J., Spitzer, Jaclyn B.; *Adult Audiologic Rehabilitation*, 2nd ed. (2013), 159 - 206
- b. Intermediate: Grenness, C. Hickson, L., Laplante-Lévesque, & Davidson, B. (2014). Patient-centered care: A review for rehabilitative audiologists. *International Journal of Audiology*, 52, 1-8

## 4. Lecture

- PowerPoint: "Person-Centered Practice"

## 5. Class Activity

- Class Activity 1: Exploring your own experience as a patient
- Class Activity 2: What is your PPOS score?

## 6. Reflection

- a. Consider your own PPOS score, and think about ways your score might become more person-centered. Please write down your thoughts.
- b. How has your definition of person centered care changed after participating in this lecture?

## 7. Homework Assignment

- a. View video ethnography of audiologists' reflections on practicing person centered care and answer the questions in the worksheet.

**LESSON OVERVIEW: WHAT ARE WE DOING TODAY?**

1. Establish learning mind-set.
2. Today we are talking about person centered care. Particularly, this section will focus on what it means to build patient-centered relationships in our daily practice. We will discuss the benefits that both patients and audiologists obtain when person centered care is part of the clinician-client relationship.
3. Begin by going over the goals, and starting the lecture with a couple of activities that will set the stage for optimum reflection throughout the lecture.
4. **Activity**  
Before delving into the lecture by Sue Ann Erdman, engage the students in an activity in which they reflect on their own experiences as patients, complete the PPOS, and create their own definition of person centered care.
5. **Presentation**  
Sue Ann Erdman's Webinar and Power Point on person centered care follows immediately after the class activities. Please log in to the Ida website, use the following link, go to the section called "Person-Centered Practice" and play the video "PCC Webinar": [http://idainstitute.com/toolbox/university\\_course/videos\\_and\\_handouts/unit\\_i/](http://idainstitute.com/toolbox/university_course/videos_and_handouts/unit_i/)  
The myths surrounding PCC and some research data regarding these myths will be presented immediately after Sue Ann Erdman's presentation.
6. **Reflection**
  - a. Consider your own PPOS score, and think about ways your score might become more person-centered. Please write down your thoughts.
  - b. How has your definition of person-centered practice changed after reflecting on this lecture?
7. **Closing**
  - a. Announcements
  - b. Reading Assignment
  - c. Homework: Explore Audiologists' reflections of how they feel when they have engaged in person centered care.

**CLASS ACTIVITY**  
(INSTRUCTOR COPY - 1/2)

### Goal of Activity

This activity requires that the student complete the PPOS and calculate three scores: Total, Caring, and Sharing. The goal of this activity is to actively engage the student in determining their perceived preference for communication style (person-centered) vs (doctor-centered). Having students engage in this exercise prior to learning about the specifics of person centered care, provides students with a baseline score (a snapshot) of their preference for patient-centered practice. The students will then be asked to compare their score to those of audiologists in different parts of the world (discussed in the lecture). Additionally, the PPOS may be re-administered after students have completed their course on Human Dynamics of Hearing Loss to determine how their preferences may have changed after training.

### Background on the questionnaire

The PPOS has 18 questions. The test yields a total score and two sub- scores -a Sharing Score- and a Caring Score. The sharing score reflects the extent to which the respondent believes that patients desire information and should be a part of the decision making process (e.g., Patients should be treated as if they were partners with the doctor, equal in power and status). The second 9-item subscale reflects the Caring score, and reflects the extent to which the respondent sees the patient's expectations, feelings, and life circumstances as critical elements in the treatment process (e.g., A treatment plan cannot succeed if it is in conflict with a patient's lifestyle or values).

### Instructions

Please have students fill out the PPOS. For each item, rank your level of agreement with the statement on a six-point scale, with 1 reflecting: strongly agree and 6- strongly disagree.

After they complete the PPOS have them calculate the Sharing, Caring, and Total Score.

The instructions for the calculations follow:

1. The total score is calculated by calculating the average score for all 18 items.
2. The sharing score is calculated by taking the average of the first 9 items.
3. The caring score is calculated by taking the mean of the last 9 items (items 10-18).

### Discussion

After giving students sufficient time to complete the PPOS, the discussion may begin. The instructor may want to have students raise their hand if their total score ranged between 4-6, and then a score of 1-4.

A score of 4-6 is indicative of patient-centered preferences, consistent with the Biopsychosocial model.

**CLASS ACTIVITY**  
(INSTRUCTOR COPY - 2/2)

A score of 1-4 is indicative of doctor-centered preference, more consistent with a Biomedical model.

**Have students reflect on their score:**

Were you surprised at your scores? If so, why?

What did you learn about your own preferences for patient-centered communication?

**CLASS ACTIVITY**  
(STUDENT COPY - 1/2)

**Instructions**

Please fill out the PPOS. For each item, rank your level of agreement with the statement on a six-point scale, with 1 reflecting: strongly agree and 6- strongly disagree.

**Patient-Provider Orientation Scale**

1. The doctor is the one who should decide what gets talked about during a visit.
2. Although health care is less personal these days, this is a small price to pay for medical advances.
3. The most important part of the standard medical visit is the physical exam.
4. It is often best for patients if they do not have a full explanation of their medical condition.
5. Patients should rely on their doctors' knowledge and not try to find out about their condition on their own.
6. When doctors ask a lot of questions about a patient's background, they are prying too much into personal matters.
7. When doctors are truly good at diagnosis and treatment, the way they relate to patients is not that important.
8. Many patients continue asking questions even though they are not learning anything new.
9. Patients should be treated as if they were partners with the doctor, equal in power and status.
10. Patients generally want reassurance rather than information about their health.
11. If a doctor's primary tools are being open and warm, the doctor will not have a lot of success.
12. When patients disagree with their doctor, this is a sign that the doctor does not have the patient's respect and trust.
13. A treatment plan cannot succeed if it is in conflict with a patient's lifestyle or values.
14. Most patients want to get in and out of the doctor's office as quickly as possible.
15. The patient must always be aware that the doctor is in charge.
16. It is not that important to know a patient's culture and background in order to treat the person's illness.
17. Humor is a major ingredient in the doctor's treatment of the patient.
18. When patients look up medical information on their own, this usually confuses more than it helps.

Sharing score

  


Total score

Caring score

**CLASS ACTIVITY**  
(STUDENT COPY - 2/2)

Answer the following questions.

1. What surprised you about your scores or your answer to any one particular question? And Why?
2. What did you learn about your own preferences for patient-centered communication?
3. Think about the way you practice or interact with clients. Is there a mismatch between your own perceived preference as noted by the PPOS and the way you actually practice?



## HOMEWORK ASSIGNMENT

The following assignment is designed to allow students to reflect on how practicing audiologists feel about implementing PCC in their busy practice.

This activity requires that you go into the Ida Institute Website to access the audiologist's video reflections on practicing PCC.

To view Joe Montano's reflection please log in to the Ida website, use the following link, go to the section called "Person-Centered Practice" and find the video "Faculty member Joseph":

[http://idainstitute.com/toolbox/university\\_course/videos\\_and\\_handouts/unit\\_i/](http://idainstitute.com/toolbox/university_course/videos_and_handouts/unit_i/)

To view Mathew Ground's reflection please log in to the Ida website, use the following link, go to the section called "Person-Centered Practice" and find the video "Matthew Grounds":

[http://idainstitute.com/toolbox/university\\_course/videos\\_and\\_handouts/unit\\_i/](http://idainstitute.com/toolbox/university_course/videos_and_handouts/unit_i/)

After watching the videos answer the questions below. Also, as you watch the videos, reflect on aspects of the lecture on person centered care.

For this exercise answer the following questions.

1. How does Joe feel about practicing PCC?
2. According to Joe, what are some benefits gained by patients?
3. According to Joe, what are some benefits gained by the clinic?
4. According to Joe, what are some benefits gained by the audiologist?
5. How does Mathew feel about practicing PCC?
6. According to Mathew, what are some benefits gained by patients?
7. According to Mathew, what are some benefits gained by the clinic?
8. According to Mathew, what are some benefits gained by the audiologist?
9. Are Joe's and Mathew's reflections congruent with the data discussed in the lecture? If so, how? If not, how do they disagree?
10. How has seeing audiologists' reflections inspired you to practice PCC with your own patients?