Summary of Feedback on Draft PCCHR Guiding Principles

Theme of Comments	Summary of Comments	Is it Addressed by The Shared Principles of Primary Care[i,ii]? If so, which one(s)?
Stakeholder Accountability	Commenters suggested that roles and accountability be made clear and that collaboration toward shared outcomes occurred. There was also comment that advised all recommended reform model participants must be accountable.	**4. Team-Based and Collaborative**-Interdisciplinary teams, including individuals and families, work collaboratively and dynamically toward a common goal. The services they provide and the coordinated manner in which they work together are synergistic to better health. **5. Coordinated and Integrated**-Primary care proactively communicates across the spectrum of care and collaborators, including individuals and their families/care partners.
Accountability of Outcomes	A suggestion was made to include meaningful measures of wellbeing as important outcomes for evidence-based interventions.	**7. High-Value**- Primary care achieves excellent, equitable outcomes for individuals and families, including using health care resources wisely and considering costs to patients, payers and the system. **7. High-Value**- Primary care practices employ a systematic approach to measuring, reporting and improving population health, quality, safety and health equity, including partnering with individuals, families and community groups.
Differing types of health disparities	Several commenters noted that health disparities and inequities can exist in many forms (e.g. gender, ethnicity, language, disability, social economic status, sexual preference, etc.).	**1. Person & Family Centered**-Primary care is focused on the whole person – their physical, emotional, psychological and spiritual wellbeing, as well as cultural, linguistic and social needs.

	There were also mentions of including equity and wellbeing outcomes in the principles. A commenter suggested to expand upon socioeconomomic to include social, environmental, genetic/epigenetic and behavioral factors.	**3. Comprehensive & Equitable**-Primary care practices partner with health and community-based organizations to promote population health and health equity, including making inequities visible and identifying avenues for solution. **3. Comprehensive & Equitable**-Primary care clinicians seek out the impact of social determinants of health and societal inequities. Care delivery is tailored accordingly. **3. Comprehensive & Equitable**-Primary care addresses the whole-person with appropriate clinical and supportive services that include acute, chronic and preventive care, behavioral and mental health, oral health, health promotion and more. Each primary care practice will decide how to provide these services in their clinics and/or in collaboration with other clinicians outside the clinic. **6. Accessible**-Primary care is readily accessible, both in person and virtually for all individuals regardless of linguistic, literacy, socioeconomic, cognitive or physical barriers. As the first source of care, clinicians and staff are available and responsive when, where and how individuals and families need them.
Layout	Several commenters noted the potential overlap between the second and third guiding principle and suggested to combine the two.	Not Applicable
Grammar	Several commenters preferred a variation of phrases to incorporate action words.	Not Applicable

	A commenter suggested that one of the principles was more closely related to a goal rather than a principle.	
Word Choice and Clarity	Several commenters mentioned that there were opportunities to clarify "vague" language: • unintended consequences • patient • barriers upstream • all participants • length of time (i.e. over short or long term periods) • community health as compared to population health	Not Applicable
Behavioral Health	Commenters expressed the want to consider the incorporation of behavioral and mental health in the principles.	**3. Comprehensive & Equitable**-Primary care addresses the whole-person with appropriate clinical and supportive services that include acute, chronic and preventive care, behavioral and mental health, oral health, health promotion and more. Each primary care practice will decide how to provide these services in their clinics and/or in collaboration with other clinicians outside the clinic.
Patient / Provider Relationship	Commenters suggested that the patient provider relationship. Specifically noting that there should be more of a focus on a system that engages the patient and caregiver in culturally competent shared decision making. One commenter suggested that Health IT programs be designed to improve patient experience (promote patient / provider communication, enhance care coordination, link community resources etc.)	**1. Person & Family Centered**-Primary care is grounded in mutually beneficial partnerships among clinicians, staff, individuals and their families, as equal members of the care team. Care delivery is customized based on individual and family strengths, preferences, values, goals and experiences using strategies such as care planning and shared decision making.

		2. Continuous- Dynamic, trusted, respectful and enduring relationships between individuals, families and their clinical team members are hallmarks of primary care. There is continuity in relationships and in knowledge of the individual and their family/care partners that provides perspective and context throughout all stages of life including end of life care. **6. Accessible**- Primary care is readily accessible, both in person and virtually for all individuals regardless of linguistic, literacy, socioeconomic, cognitive or physical barriers. As the first source of care, clinicians and staff are available and responsive when, where and how individuals and families need them. **6. Accessible**- Primary care provides individuals with easy, routine access to their health information.
Patient and Community Centered	Commenters expressed interest in including family and community focuses in the models. Examples include: • 2 generation and multi-generation approaches • promotion of coordinated safe quality (clinical) health care • patient education and outreach	**1. Person & Family Centered**-Primary care is grounded in mutually beneficial partnerships among clinicians, staff, individuals and their families, as equal members of the care team. Care delivery is customized based on individual and family strengths, preferences, values, goals and experiences using strategies such as care planning and shared decision making. **1. Person & Family Centered**-Individuals are supported in determining how their family or other care partners may be involved in decision making and care.

		1. Person & Family Centered-There are opportunities for individuals and their families to shape the design, operation and evaluation of care delivery
Financing	There were suggestions regarding the incorporation of sustainable financing potentially tied to health, equity and wellbeing. There was also a suggestion referencing healthcare and related expenditures in other service sectors with the returns on investment section in the principles. In addition, a comment was made stating that the principles should not be an unfunded mandate as that differentiates against certain practices.	**This theme is not addressed by the Shared Principles of Primary Care.**
Strength-Based Models	There was a suggestion to incorporate evidence-based, strength-building and health promoting frameworks in the models.	**7. High-Value**-Primary care practices employ a systematic approach to measuring, reporting and improving population health, quality, safety and health equity, including partnering with individuals, families and community groups.

---

[i] Epperly T, Bechtel C, Sweeney R, et al. The Shared Principles of Primary Care: A Multistakeholder Initiative to Find a Common Voice. Fam Med. 2018:51(2):179-184; Appendix 1.

[ii] Primary Care Speaks As One: The Shared Principles of Primary Care." n.d. New Primary Care Paradigm. <https://www.newprimarycareparadigm.org/shared-principles>.