

Measure #34. Personal Health Records (PHR)

CARE COORDINATION MEASURE MAPPING TABLE

	MEASUREMENT PERSPECTIVE		
	<i>Patient/Family</i>	<i>Health Care Professional(s)</i>	<i>System Representative(s)</i>
CARE COORDINATION ACTIVITIES			
Establish accountability or negotiate responsibility			
Communicate			□
<i>Interpersonal communication</i>			
<i>Information transfer</i>			□
Facilitate transitions			
<i>Across settings</i>			
<i>As coordination needs change</i>			
Assess needs and goals			
Create a proactive plan of care			
Monitor, follow up, and respond to change			
Support self-management goals			□
Link to community resources			
Align resources with patient and population needs			
BROAD APPROACHES POTENTIALLY RELATED TO CARE COORDINATION			
Teamwork focused on coordination			
Health care home			
Care management			
Medication management			
Health IT-enabled coordination			■

Legend:

- = ≥ 3 corresponding measure items
- = 1-2 corresponding measure items

Personal Health Records (PHR)

Purpose: To evaluate and discern areas for improvement in the patient-centeredness of personal health records (PHR).

Format/Data Source: The framework for evaluation (based on patient-centeredness) includes: (1) respect for patient values, preferences, and expressed needs; (2) information and education; (3) access to care; (4) emotional support to relieve fear and anxiety; (5) involvement of family and friends; (6) continuity and secure transition between health care providers; (7) physical comfort; and (8) coordination of care. For the purpose of this measure, personal health records (PHR) are defined as, “software applications that patients can use to communicate with their clinician, to enter their own health data, and to access information from their medical record and other sources.”¹

Date: Measure published in 2009.¹

Perspective: System Representative(s)

Measure Item Mapping:

- **Communicate:**
 - *Between health care professional(s) and patient/family:* 9, 10
 - Information transfer:
 - *Participants not specified:* 5
- **Support self-management goals:** 1, 5
- **Health IT-enabled coordination:** 1-10

Development and Testing: Literature reviews and personal communications initially identified areas to address within PHR. In-depth, semi-structured interviews were conducted in a variety of PHR settings to develop the 10-item instrument discussing personal health records. Post-interview respondent validation demonstrated sufficient accuracy. When evidence was available for patient preferences, it was compared to existing PHR policies to propose a best practice model.¹

Link to Outcomes or Health System Characteristics: None described in the source identified.

Logic Model/Conceptual Framework: Patient-centeredness was assessed against a framework of care defined within Format/Data Source. A patient-centered policy model was developed with the ideas of patient empowerment and full control of the personal health record.¹

Country: United States

Past or Validated Applications*:

- **Patient Age:** Not Applicable
- **Patient Condition:** Not Applicable
- **Setting:** Not Setting Specific

*Based on the source listed below and input from the measure developer.

Notes:

- All instrument items are located in Table 1 of the source article.¹
- This instrument contains 10 items; all 10 were mapped.

Source:

1. Reti SR, Feldman HJ, Ross SE, et al. Improving personal health records for patient-centered care. *JAMIA* 2010;17:192-5.