

Enhancing Person-centred care

Key Message

Person-centred care is about ensuring the patient/client is at the centre of everything you do with and for them. This means that you need to take account of their individual wishes and needs; their life circumstances and health choices. It is providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions.

The effective practitioner must be able to identify, examine, challenge and communicate ways in which high quality, person-centred care is delivered in their local area. You must ensure that the patient/client is at the centre of every aspect of their care. In order to do this, you must listen to and take into account individual wishes and needs, personal/family circumstances and their health choices.

As an effective practitioner you should also be aware of the associated strategies and policy such as:

[Patient Rights \(Scotland\) Act \(2011\)](#)

[Charter of Patient Rights and Responsibilities](#)

There are several tools and techniques available to support in delivering person-centred care. You may wish to consider how you, or your team gather patient stories, access specific feedback on care and use effective communication techniques. Please follow the links on this page to explore these further.

What does this mean for the Effective Practitioner?

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Learning Activities



Understanding person-centredness

Consider what being person-centred means to you as a person.

- Discuss with colleagues the way your patients are cared for which are not person centred and consider how this might be addressed.
- Take time to discuss with patients their wishes and views and what they want out of the care they are receiving.
- Consider if there should be any changes to this person's care in light of the above discussion.
- In what ways do you and your colleagues adopt a person-centred approach to each other?

It may be useful to watch Robert Dalrymple's [video podcast](#) and consider what person centredness means when supporting him to live his life in the way he wishes.

Record your learning in your professional portfolio.

Related KSF core dimensions: personal and people development, quality.

Notes



Hearing the patient's story

Inviting patients and their families to describe their care experience can be a powerful way of enhancing person-centredness on both an individual level and as part of service improvement. Patient stories can be gathered in a range of ways.

An innovative approach to gathering stories is through Emotional Touch Points – this involves asking service users and their families to describe their feelings at different times of the health care journey through the use of a simple form. This approach has been designed by the Compassionate Care Team in Edinburgh Napier University / NHS Lothian.

Here we provide a brief taster of using emotional words to seek feedback from patients and their families.

How to use this tool:

- Select 2 or 3 patients and or family members who are receiving care as part of the service you provide.
- Ask if they would be happy to share how they feel about the care they have received – explaining that it will help you to learn what works well and things that need to be developed to enhance the service for them and others.
- Show them the [How do you feel form](#) and explain that you are interested in different stages of their journey and agree with them what stage(s) they would like to talk about. There is a blank box should they identify a part of their experience that is not detailed on the form.
- Ask them to select the words which they would use to describe how they feel (as many as they like) and they can choose their own word if it is not listed on the form.
- Ask them to explain why they felt in this way: listen and value all feedback whether positive or negative.
- Make some notes of what the person has said and check this written record with the patient or family member for accuracy.
- Discuss any actions which might be taken as a result of this feedback – agreeing with the service user any actions.

Examine these stories and see what learning there is for you.

- What have you learned about the patient experience?
- How did it make you feel?
- What have you learned about the patient as an educator?
- Consider any changes you need to make to your own practice to improve the patient experience.

- Are there any general messages that you need to feedback to your colleagues and/or the wider organisation to enhance the patient experience?

Record your learning in your professional portfolio.

Related KSF core dimensions: personal and people development, service improvement and quality.

Notes



Feedback Sheets

Another way of learning about the experiences of patients, families and staff in giving or receiving the service is to invite them to complete feedback cards. The feedback card has been designed by the Compassionate Care Team in Edinburgh Napier University / NHS Lothian (available in the Supplementary Resources [section](#)). This method of gathering information is quicker than eliciting a story from a person but does not provide details of how people are feeling.

You can use this method at various points in the experience journey, whether the person is a staff member, patient or family member.

The form has been designed to elicit specific feedback by asking for examples rather than general comments. Thus asking a patient 'what have we got right for you?' elicits specific examples which staff can learn from to enable these good practices to happen more of the time. By asking people what could have been done differently, people are asked to focus on possibilities rather than problems.

You can use this method in a range of ways to learn about experiences of others. For example:

- Asking patients/clients who you have cared for that day to complete the form.
- Asking all patients/clients upon discharge to complete the form.
- Asking visiting staff to complete a feedback sheet at the end of their shift.
- Giving out forms to seek feedback about specific events such as mealtimes, relative rounds, following a specific learning event.

You may find it useful to sit with the person and ask the questions directly rather than handing out the forms for self completion. You will then be able to ask for examples and clarify issues.

Once you have collated individual feedback forms, it is then important to find time to talk these through with colleagues. Agree what the overall themes are and negotiate any changes or improvements to practice.

Based on the collated results, you may want to publicise to staff, patients and families by using the form "You told us - we responded by" form (available in the Supplementary Resources [section](#)).

Record your learning in your professional portfolio.

Related KSF core dimensions: communication, service improvement and quality.

Notes

Checking patient understanding



Clear communication is essential for effective patient-centred care and patient safety.

Patients remember and understand less than half of the information they are given, which can give rise to serious health problems.

Teach Back is a simple technique that involves asking patients to explain or demonstrate, in their own words, what you've discussed with them - for example:

'To be sure I've explained this consent form clearly, can you tell me what you are agreeing to?' Or

'Please show me how you will use the asthma inhaler, so I can be sure I have given you clear instructions.' Or

'We discussed a lot today. Can you tell me what you found most important?'

This approach can be used in a range of situations such as breaking bad news, clinical prognosis, diagnosis, prescriptions and medications management, and verifying understanding of an activity regime.

When you are supporting a patient or client about their care/treatment plan, try this approach to ensure you are providing person centred information:

1. Identify the person's information needs through discussion with them.
2. Provide the information in a way which fits with the patient/client's ability to understand e.g. use of terminology, amount and level of information, focussing on the important messages, using appropriate open and closed questioning.
3. Check out understanding by asking them to explain back to you, asking them to show you or asking them questions to check out if they can apply the information to their own situation.
4. If you feel that the patient has further information needs, consider an alternative approach to patient education such as providing a relevant leaflet or typing up a sheet of instructions, or involving their carer/family member in the patient education exchange.

Having carried out the above approach

- How did it go?
- Would this be something you might use again?
- How might you improve your technique?

Record your learning in your professional portfolio.

Related KSF core dimensions: communication, service improvement and quality.

Notes



Communication

In feedback, patients have said that they want healthcare practitioners to care for them as individuals.

Carry out an interaction with a patient/client in which you are discussing their health needs, following this, consider how skilled and confident you were at:

- helping the patient/client to feel at ease?
- giving the patient/client time to tell you his/her own story?
- paying close attention to what the patient/client was saying?
- being aware/asking about aspects of the patient's/client's life which may affect their health?
- showing that you fully understood the patient's/client's concerns?
- showing compassion, honesty and being positive about the patient's/client's needs?
- explaining things clearly in a way the person can understand?
- helping the patient to improve their own situation making a plan of action with the patient/client?

(These prompts are based on the questions asked in the [CARE measure](#) which asks about people's experience of consultation)

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Related KSF core dimensions: communication, equality & diversity, health & well being.

Notes