Person-centred approach in Neurorehabilitation

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Person-Centredness

• Can we define PC?

• How important is PC?

• How can we know that our services are person-centred?
Evolving definition

- Multi-dimensional
- Evolving
- “understanding the patient as a unique human being”
  
  (Balint, 1969)
Health Foundation (2014)

- Affording people dignity, compassion and respect
- Offering co-ordinated care, support or treatment.
- Offering personalised care, support or treatment
- Supporting people to recognise and develop their own strengths and abilities to enable them
Definition in actions
(Schmitt 2012)

• Shared decision-making and goal-setting
• Appropriate provision of information and education
• Appropriate support, communication and respect
• Delivering coordinated, well organized care that ensures smooth transition from one environment to another
Importance of Person-centredness

- Evidence of improved outcomes in PROMs and PREMs
- Improved continuity of care
- Provides holistic care
- Facilitates team working
- Facilitates communication with families and carers
- Improved access to appropriate services
- Value for money in service provision
- Cost savings with improved support to manage own condition
Walking the walk

Santana et al (2017)
Organisational Level

‘Culture of Care Barometer’ – KCL

Creating a PC culture

- Measure of Trust level values and culture
- Team level support and management
- Support and respect between colleagues
- Constraints in doing one’s job
Commence Board meeting with service-user experience ‘story’
Service/User Level

Care and Relational Empathy Measure

- Patient experience feedback (not satisfaction)
- Specific interaction
- Validated
- Facility to benchmark

http://www.caremeasure.org/
PC goal-setting - Life Threads Model

Figure 1. Complete life thread.

Figure 2. Life threads unravelling.

Figure 4. Life threads joining up or tied off.

Ellis-Hill et al, Disability and Rehabilitation, 2008, 30(2)
Life Threads Model

• Endorsing a positive view of self
• For professionals - ‘being’ with as opposed to ‘doing’ for
• Seeing acquired disability as a time of transition rather than solely as ‘loss’
• Processes involved in finding “the new me”
• Engagement in physical, psychological and social processes to live a life not dominated by disability

Ellis-Hill et al, Disability and Rehabilitation, 2008, 30(2)
Outcomes from PCC

• 21 year old male returned to University following SAH to study engineering.
  • Intensive co-ordinated OT, PT, Psychology in conjunction with client, family and University

• 19 year old female with GBS and history of autism (high impact upon body weight)
  • Flexible meal-times
  • Flexible meal options
  • Family-centred rehabilitation – relationships
  • Aspiration goal-setting
Thank you

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References


• The Health Foundation (2014): Person-centred care made simple
  https://www.health.org.uk/sites/health/files/PersonCentredCareMadeSimple.pdf