



Top tips: person-centred care



This guide has been produced in partnership with the RCP Patient and Carer Network and the RCP would like to thank workshop participants for their valuable contribution.

About this project

In autumn 2017, the RCP facilitated a conversation between doctors and patients about person-centred care in the acute setting. Although there are many examples of outstanding person-centred care, physicians felt that good practice existed to varying degrees across the healthcare system, and patients agreed, expressing that their experiences had varied.

The RCP aims to develop a shared understanding of what person-centred care means for the patients in a hospital environment, and what steps can be taken to improve their experiences through an ongoing conversation with members and patients.

Communication

Introduce yourself by name

The **'Hello my name is'** campaign identified a straightforward but effective way to start to improve person-centred care through fundamental communication techniques.

hello my name is...

Introductions are about making a human connection between one human being who is suffering and vulnerable, and another human being who wishes to help. They begin therapeutic relationships and can instantly build trust in difficult circumstances.

Dr Kate Granger MBE and Chris Pointon
Co-founders of 'Hello My Name Is'

Help patients communicate their priorities

Patients might see a variety of clinical staff through their journey as a patient, frequently repeating their priorities. **'What matters to me today' bedside boards** have proved a success among some patients and doctors by helping to highlight what matters to them.

- ✓ At the start of the conversation, ask what the patient wants to discuss in the time available.
- ✓ Identify the patient's immediate and long-term priorities.
- ✓ Ask about any fears or worries they have relating to their care.¹
- ✓ Ask how the treatment is affecting their priorities in life.
- ✓ Actively listen to what the patient has to say, and read body language to take cues on whether further explanation or reassurance is needed, or if your patient is interested in receiving further information.
- ✓ Use eye contact: 'Direct gaze has the power to enhance the experience that the information present in the situation is strongly related to one's own person.'²
- ✓ Repeating key words that a patient has said or priorities they have identified can help to convey that you are listening and understand, and can help to build trust.

Care and treatment planning

- ✓ With permission from the patient, invite carers or relatives to join the conversation (by phone if they cannot attend in person).
- ✓ Avoid medical jargon where possible.
- ✓ Recognise the value of the experience the patient has gained from living with the condition and the perspective they can bring to the decision-making process.³
- ✓ Ask what questions the patient or family has in order to help build understanding or identify misunderstanding.
- ✓ Draw on the priorities you have identified to form a basis for a discussion of options and a care plan.
- ✓ If appropriate, help the patient and/or carer to establish a care plan or explain how a care plan might help them take control of their condition and balance it with their priorities.
- ✓ Provide patients with information to support self-management, including how to recognise symptoms and appropriate action to take.⁴
- ✓ Ask the patient to repeat a summary of the conversation to ensure they have understood the options and risks.
- ✓ For long-term conditions, revisit treatment decisions periodically to ascertain whether priorities have changed.

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Patient experience and feedback

Assess patient experience in real time either in person or through patient feedback walls or drop boxes.



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References

1. Epner DE, Baile WF. Patient-centred care: they key to cultural competence. *Ann Oncol* 2012;23:33–42.
2. Conty L, George N, Hietanen JK. Watching eyes effects: when others meet the self. *Conscious Cogn* 2016;45:184–197.
3. The King's Fund. *Delivering better services for people with long-term conditions*. London: King's Fund, 2013. www.kingsfund.org.uk/sites/default/files/field/field_publication_file/delivering-better-services-for-people-with-long-term-conditions.pdf (Accessed 23/11/17).
4. NHS Constitution for England. London: DH, 2015. www.gov.uk/government/publications/the-nhs-constitution-for-england.

Resources for doctors

- > **Northumbria Healthcare NHS Foundation Trust** – a leading example of real-time patient feedback.
- > Further information about shared decision making is available from the **NHS England website**.
- > Find further information about consent and decision making from the GMC **here**.
- > **House of Care** – a model identifying what is needed to make care more collaborative.
- > **Coalition for Collaborative Care** – Find out more about co-production in practice.
- > Read Dr Nia Wyn Davies' story about her **experience as a patient and a doctor**.
- > Find case studies on patient-centred care from the Future Hospital Programme (FHP) **here** – including Shirine Boardman and Chris Asplin's experiences measuring and improving patient experience on an acute medical unit.
- > **FHP Case Study: Sandwell and West Birmingham** – creating a person-centre respiratory service by integrating primary, acute and community services.

Resources for patients

- > **Decision aids** help patients to have informed conversations with their doctor and reach a shared decision about their care and treatment options.
- > **Making Good Decisions in Collaboration (MAGIC)** was a programme from the Health Foundation that looked at embedding shared decision making in practice.
- > **Year of Care** is a partnership that aims to provide personalised care planning for people living with long term conditions.
- > **WOW! Exchange Programme** was set up to allow people to exchange resources that help people live well in a way that matters to them.
- > **Specialty-specific decision aids** provide examples of specific aids on shared decision making.
- > Further RCP resources on shared decision making are available **here**.

For more information,
visit the **RCP website**