

Module 4 - Person-centered Care

Introduction

Research demonstrates that aging individuals thrive in their own home environments. The role of the home care aide is to assist the aged or disabled individual in remaining at their home as long as possible. While receiving care and support to remain in their home, the individual may be at risk of losing his/her individuality, dignity, and rights. This module will introduce the home care aide to person-centered care, a philosophy that promotes individuality and maintains a person's rights involving the care planning process.

Objectives

At the end of the module, the nurse aide will be able to:

1. Explain the concept/philosophy of person-centered care
2. Recognize key values and principles of person-centered care and thinking
3. Apply person-centered care in the delivery of daily care activities

Instructional Resource Materials

- PowerPoint for Module 4 - Person-centered Care
- Handouts/Activities

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Slides	Instructor's Script	Notes
Slide 1 Title Slide	Script Person-centered Care	
Slide 2	Script Objectives - At the end of the module, the nurse aide will be able to: 1. Explain the concept/philosophy of person-centered care 2. Recognize key values and principles of person-centered care and thinking 3. Apply person-centered care in the delivery of daily care activities	
Slide 3	Script <ul style="list-style-type: none"> • To be person-centered means: <ul style="list-style-type: none"> ○ Treating patients and family members with dignity and respect ○ Pledging to be honest when trying to balance what is important to and important for the patient ○ Seeking to understand patients in the context of their age, gender, culture, ethnicity, belief system, social and income status, education, family, and any other factors that make them unique ○ Acknowledging and valuing families and supporting their efforts to assist family members 	
Slide 4	Script <ul style="list-style-type: none"> • Before we continue, let's do an activity so that we can demonstrate how important personal choices are. Handout/Activity 1 – Mosquito <ul style="list-style-type: none"> • This activity will produce dialogue among the students about the need to preserve independence and individuality. Faculty should foster this conversation and then begin discussion about person-centered philosophy. 	
Slide 5	Script <ul style="list-style-type: none"> • Person-centered philosophy: <ul style="list-style-type: none"> ○ Recognizes that people with health care needs, those with disabilities, and those who are aging are unique individuals with unique needs, wants and desires. ○ The term, person-centered, encourages us to shift from a care role to that of a support role — supporting the patient in the lifestyle he or she chooses and helping make dreams become reality. 	

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	<ul style="list-style-type: none"> • Person-centered values and principles: <ul style="list-style-type: none"> ○ Apply to every individual ○ A person-centered system involves person-centered thinking and planning. 	
<p>Slide 6</p>	<p>Script</p> <ul style="list-style-type: none"> • We must start with what is important to and important for the patient. • What is important to a patient includes: <ul style="list-style-type: none"> ○ People to be with/relationships. ○ Things to do. ○ Places to go. ○ Rituals or routines. ○ Rhythm or pace of life. ○ Things to have. ○ Quality of life. • What is important to a patient also includes what people are saying: <ul style="list-style-type: none"> ○ With their words. ○ With their behavior. • What is important for patients includes only those things that we need to keep in mind regarding: <ul style="list-style-type: none"> ○ Issues of physical health & safety, including wellness and prevention. ○ Emotional health and safety, including support needed. ○ What others see as important to help the patient be a valued member of the community. 	
<p>Slide 7</p>	<p>Script</p> <ul style="list-style-type: none"> • Person-centered planning is a set of promises <ul style="list-style-type: none"> ○ To listen to what the patient says. ○ To listen for what is meant. ○ To act on what we hear. ○ To continue acting on what we hear. • To be honest with the patient when: <ul style="list-style-type: none"> ○ What is being requested will take time. ○ We do not know how to help obtain what is being requested. ○ What the patient is requesting conflicts with staying healthy or safe, and we cannot find a good balance between important <i>to</i> and important <i>for</i> the patient. 	
<p>Slide 8</p>	<p>Script</p> <p>Handout/Activity 2 – Daily Routine</p> <ul style="list-style-type: none"> • Divide students into small groups of 3-4 people. 	

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- Have students write down their own daily routine. Ask students to write what they do from the time they wake up until the time they go to bed. Use times such as, 6am – wake up.
- Tell participants that they do not have to share anything about their sexual or bathroom practices.
- When everyone is finished, have participants swap their routines with someone in the group.
 - Ask how it would be if this was now their routine instead of their own.
 - Ask what insights come to them when they think about living someone else's routine instead of their own.
- Have them share their routines with each other in their small group and compare notes.
 - Ask what insights come to them as they hear how we all have different patterns and routines.

Class Discussion:

- Ask a few people to share their daily routine with the rest of the class. They may talk about relationships and connections, taking care of others (people, pets), spiritual time or busy time, shower or bath preferences, or quiet time during the day.
- Explore with them what happens if their routine is interrupted or hindered; for example, if they have guests or are staying somewhere else. Have them talk in small groups about what is happening in their agency now:
 - How much are individuals able to maintain their daily routines?
 - What is the impact now on patients and staff when people are treated according to the agency's timeline instead of the patient's?
 - What actions could be taken so people can conduct their day according to their own individual rhythms?

Closing points:

- Everyone has a routine. It is surprising how much of a habit this is for each of us.
- Each person's daily routine sets the pace of the day. Any interruption in a person's routine can set a negative tone for the rest of their day.
- The things that throw off your daily routine can throw off your patient's routines, too.
- Given the importance of starting our day right, we will see positive outcomes throughout the day when patients receiving home care services can start their day right as well.

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<p>Slide 9</p>	<p>Script</p> <ul style="list-style-type: none"> • Another way of looking at person-centered care is care that is tailored to the abilities and changing needs of each patient. • Person-centered care is about recognizing patients as individuals and attending to the needs and dignity of each patient. It is a set of values that says that the system should serve the needs of the people who live within it. • Person-centered care may be called other names, such as consumer-directed care, person-directed care, or person-directed planning. • Consumer-directed care refers to the trend that allows patients to arrange and supervise their own care. • The fact that consumers have a strong say in their care is a result of years of advocacy and pressure on lawmakers to expand publicly funded personal assistance services. • In addition, consumers demanded that some conditions (old age, some disabilities, pregnancies) be considered less medical-related and instead, be approached from a broader perspective, allowing more services to be available. • Certain home care services have also proven to be more cost effective as well. Therefore, if the patient can choose which services they want, spending will be decreased. 	
<p>Slide 10</p>	<p>Script</p> <ul style="list-style-type: none"> • More people need home care services now more than ever. It is estimated that 80% of people who need some supportive assistance are not in institutions. Rather, they are in the community, mostly in their own homes. • Person-centered care is guided by the thought that patients can shape and direct their own supportive services. • However, agencies are often guided by their own schedules or rules for the home care aides. • Too often, agencies plan patient services based on the availability of their own staff. For example, an agency has an aide available who can see a patient each day at 12pm. However, the patient is incontinent and needs morning care. Additionally, the patient prefers a morning bath. Scheduling that patient to be seen at 12pm is 	

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	<p>meeting the needs of the agency, not the needs of the patient.</p> <ul style="list-style-type: none"> • With person-centered care, patients feel empowered to live as independently as possible as they are a part of their own health care choices and preferences, directly affecting how they conduct their lives. 	
Slide 11	<p>Script Handout 3 - Principles and Thinking of Person-centered Care</p> <ul style="list-style-type: none"> • What are some principles of person-centered care and thinking for home care? These are principles you can use no matter where you work. • Encourage students to comment on the principles as you go through the following slides. 	
Slide 12	<p>Script</p> <ol style="list-style-type: none"> 1. Get to know each patient. 2. Appreciate and honor each patient’s lifelong pattern by responding to each patient’s preferences and needs. <ul style="list-style-type: none"> • Example: A patient desires to sleep in later, bathe in the evening and have a more flexible schedule consistent with his/her life before needing home care services. • Discuss these needs with your supervisor. The scheduler/coordinator will need to be aware of these preferences as well. 	
Slide 13	<p>Script</p> <ol style="list-style-type: none"> 3. Remember, you are providing care in the <i>home of the patient</i>. All staff are visitors and the patient is in control of their own care and environment. 	
Slide 14	<p>Script</p> <ol style="list-style-type: none"> 4. Recognize that each patient can and does make a difference. 5. Respond to each patient’s spirit, as well as mind and body. 	
Slide 15	<p>Script</p> <ol style="list-style-type: none"> 6. Promote a healthy spirit by fostering fun and good humor. <ul style="list-style-type: none"> • Example: staff can encourage the patient to go outside on nice days. 7. Respect others just as you would like to be respected. 	

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Slide 16	<p>Script</p> <p>8. Make it possible for each patient to have a satisfying life.</p> <p>9. Speak up for the needs and desires of each patient.</p> <ul style="list-style-type: none"> • Example: the patient wants to meet any replacement aides before being assigned. 	
Slide 17	<p>Script</p> <p>10. Realize that all patients are entitled to make their own decisions about their lives.</p> <p>11. Encourage the patient to participate actively in the planning of their daily care.</p>	
Slide 18	<p>Script</p> <p>Handout/Activity 4 – Key Values and Principles</p> <ul style="list-style-type: none"> • Give students Activity 4 and let them work independently on each example. • When students are finished, have a class discussion, sharing some of the students’ examples. • The faculty should help to facilitate this discussion and simplify the values and principles if needed. 	
Slide 19	<p>Script</p> <p>1. Treating individuals and family members with dignity and respect.</p> <p>Example: Asking the person how they would like to be addressed: Mr. Smith or John</p>	
Slide 20	<p>Script</p> <p>2. Helping individuals and families feel empowered to set and reach their personal goals.</p> <p>Example: Providing encouragement and praise throughout the day. Involving the patient in daily activities so they continue to feel in control of their life and care.</p>	
Slide 21	<p>Script</p> <p>3. Recognizing the right of individuals to make informed choices and take responsibility for those choices and related risks.</p> <p>Example: If a patient is diabetic and chooses to eat pie on a regular basis, it is our job to inform them of the related risk, but we cannot take away their right to make decisions, even though we may not agree with them.</p>	
Slide 22	<p>Script</p>	

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	<p>4. Building on the strengths, gifts, talents, skills, and contributions of the individual and those who know and care about the individual.</p> <p>Example: If a patient was a retired fabric designer, ask the patient if they still enjoy art activities and participate in those activities with them.</p>	
Slide 23	<p>Script</p> <p>5. Fostering community connections in which individuals can develop relationships, learn, work/produce income, actively participate in community life and achieve their full potential.</p> <p>Example: Encourage socialization with friends, family, church, etc. Socialization is a key factor in preventing depression in the elderly.</p>	
Slide 24	<p>Script</p> <p>6. Promising to listen and to act on what the individual communicates.</p> <p>Example: Make eye contact with the patient, listen while not being distracted, repeat what the patient says and communicate with the supervisor to ensure that the home care aide and agency are meeting the needs of the individual.</p>	
Slide 25	<p>Script</p> <p>7. Pledging to be honest when trying to balance what is important <i>to</i> and important <i>for</i> the person.</p> <p>Example: Trust is earned by honesty. Display honesty and integrity in every aspect of your job.</p>	
Slide 26	<p>Script</p> <p>8. Seeking to understand individuals in the context of their age, gender, culture, ethnicity, belief system, social and income status, education, family, and any other factors that make them unique.</p> <p>Example: Become more knowledgeable about diversity and age appropriate care; seek guidance from your supervisor when needed. Get to know the person and individualize the care.</p>	
Slide 27	<p>Script</p> <p>9. Acknowledging and valuing families and others important to the patient and supporting their efforts to assist other family members.</p>	

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	<p>Example: Talk with family and others important to the patient and show that you value their role with the patient and their role within the family unit; show respect with your interactions</p>	
Slide 28	<p>Script</p> <p>10. Recognizing and supporting mutually respectful partnerships among individuals, their families, close friends, communities, providers, and professionals.</p> <p>Example: Tell the patient that you recognize relationships that are meaningful to the person and show respect for those relationships.</p>	
Slide 29	<p>Script</p> <p>11. Advocating for laws, rules, and procedures for providing services, treatment, and supports that meet the needs of an individual and honor personal goals.</p> <p>Example: Keep your supervisor aware of changes with the patient and increasing needs. Work on behalf of your patient to ensure those needs are met.</p>	
Slide 30	<p>Script</p> <p>12. Endorsing responsible use of public resources to assure that qualified individuals are served fairly and according to need.</p> <p>Example: Report needs to your supervisor – the patient may need a resource such as Meals on Wheels, and referrals can be made by your supervisor on behalf of your patient.</p>	
Slide 31	<p>Script</p> <ul style="list-style-type: none"> • So, what does it take from the home care agency and staff to help promote person-centered care? • First, the agency must have a partnership mentality with all involved – staff, practitioners, patients, families, etc. It is important that all team members take the individual preferences of each patient into account for care choices. • Patients should be told from the beginning, and throughout staff time spent with the patient, that they are partners in their care, their feedback is desired, and their values and expressed needs will be respected to the best of the agency’s ability. 	
Slide 32	<p>Script</p> <p>The following is the true story of Ruby the elephant.</p>	

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	<ul style="list-style-type: none"> • Ruby was an Asian elephant born in 1973 in a logging camp in Thailand. • She was shipped to the Phoenix Zoo at seven months old. • She became the darling of the Zoo. • She grew to be 6,000 lbs. • At first Ruby was the only elephant in the Phoenix Zoo. 	
Slide 33	<p>Script</p> <ul style="list-style-type: none"> • Elephants are social animals and do best with other elephants. • Isolation is hard on young elephants. • Elephants need to stay busy with physical activities while in captivity. 	
Slide 34	<p>Script</p> <ul style="list-style-type: none"> • What happened to Ruby since she had no companionship? • <i>Ruby developed behavior problems due to her loneliness!</i> 	
Slide 35	<p>Script</p> <ul style="list-style-type: none"> • What do you do with a three-ton elephant that has behavior problems?? 	
Slide 36	<p>Script</p> <ul style="list-style-type: none"> • The Zoo looked at Ruby’s life situation and made changes. • Workplace practice: <ul style="list-style-type: none"> ○ They assigned new keepers who cared. • Environment: <ul style="list-style-type: none"> ○ The Phoenix Zoo acquired other elephants for companionship. ○ They built a new enclosure with more space to move around. • Care Practice: <ul style="list-style-type: none"> ○ These new caregivers asked, “If I was Ruby, how would I want my day to go?” 	
Slide 37	<p>Script</p> <ul style="list-style-type: none"> • What happened next? • Ruby started to thrive. • Her behavior problems started to disappear. • Caregivers discovered that Ruby was talented, and the result was... 	

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Slide 38	<p>Script</p> <ul style="list-style-type: none"> • They gave her a life of meaning and purpose. • Ruby started painting! 	
Slide 39	<p>Script</p> <ul style="list-style-type: none"> • Ruby chose her own colors and she had a keen sense of what color, and in what sequence, she wanted. 	
Slide 40	<p>Script</p> <ul style="list-style-type: none"> • Her painting convinced many doubters that Ruby really was an artist in her own right. 	
Slide 41	<p>Script</p> <ul style="list-style-type: none"> • She thrived for 25 years at the Phoenix Zoo • Ruby died in November 1998 when she lost her baby during a caesarean section due to complications from the delivery. 	
Slide 42	<p>Script</p> <ul style="list-style-type: none"> • Ruby was loved and is missed by all who knew her. • What a wonderful tribute to an elephant's life. 	
Slide 43	<p>Script</p> <ul style="list-style-type: none"> • Don't our patients deserve the life that Ruby had? 	
Slide 44	<p>Script</p> <p>What does this story teach us?</p> <ul style="list-style-type: none"> • All living beings deserve a life full of meaning and purpose. • As caregivers, we can affect the life of those we care for by opening our eyes and seeing who the individual really is. • What does it really mean to provide care? • What can we do to help those that we care for? 	
Slide 45	<p>Script</p> <p>Ruby the elephant; 1973-1998</p>	
Slide 46	<p>Script</p> <ul style="list-style-type: none"> • Congratulations! You are now well versed in the principles of person-centered care. As you implement these values into your own practice, you will enrich and enhance the lives of all your patients. You will make a difference in the lives of other! 	