FROM THE THIRD GENEVA CONFERENCE ON PERSON-CENTERED MEDICINE: THE TEAM APPROACH IN PERSON-CENTERED HEALTH CARE

Nurses and Person-Centred Care

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Abstract

At a time when overspecialisation is the norm, nurses and other health professions are challenged to provide holistic care that treats the human person as more than a collection of body organs. A person-centred approach focuses on addressing the person, rather than their illness condition. In this model, treatment and care provided by health services place the person and their families at the centre of their own care and with their full participation.

In its emphasis on a holistic perspective, the International Council of Nurses (ICN) locates person-centred care within the larger context of family and community in a dynamic and interactive state. This means that a person-centred approach must consider the family and community setting and its impact on the health and illness of the person. Person-centred care is broad in scope and requires a set of skills for nurses and other members of the health team.

ICN's Basic Principles of Nursing Care affirms that the nurse is only justified in deciding for, rather than with, what is good for the patient in highly dependent states, such as when a patient is in a coma. At all other times the rights, values, needs and preferences of people are paramount in decision making and must be used to tailor care to meet the patient's specific needs.

A team approach is the cornerstone of person-centred health care and nurses have a major contribution to make in this context. In today's complex health care systems, it is impossible for any one professional group to deliver person-centred care on its own and the team approach is a *sine qua non* for achieving the desired health outcomes. Nurses are a vital component of health teams and their role in and contribution to health teams is mandated by ethical and professional obligations. The *ICN Code of Ethics for Nurses*, for example, affirms that "the nurse sustains a co-operative relationship with co-workers in nursing and other fields". By their presence in varied health care settings and proximity to patient care, nurses are vital to the delivery of person-centred care. However, despite this key function of nurses, they are often absent from decision-making and policy matters. This nursing gap in policy participation can be a major barrier to effective health team functioning and can impact on the success of person-centred care.

Keywords

Person-centred care, nurse, patient empowerment, holistic care, self care, team approach.

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Introduction

It is important to note that, increasingly, people's expectations from health care are changing and they are demanding and taking more autonomy in their care. Indeed, we live in a time where patients are self-informed about their conditions, often referred to as "expert patients", where they are demanding to be key stakeholders in their care, where they are not willing to be passive recipients of care, and where their family wants to be

involved in care [1]. These trends should be considered in tailoring care to meet the shifting needs of our patients and their families. It means working with patients to integrate self-management of their illness, good nutrition, exercise and healthy living into social and physical environments and facilitating access to local support services. Above all, it implies partnership based on mutual respect and full engagement of the patients as their own agents of their care. The goal is to keep the focus on people, their views

and their health issues, rather than on disease and its management alone [1].

The nursing perspective

Person-centred care gives a human face to the continuum of care encompassing disease prevention, treatment, care and support services, based on the needs and voices of people, not on the needs of a system or health professionals. From the nursing perspective, a focus on the patient in a holistic way- as a whole person, not simply a health problem - has always been at the centre of nursing care.

Nursing leaders and theorists have always promoted self-care, focusing on enabling people to do as much as possible for themselves. In this model, the nurse strives to "get inside the skin" of the person by listening and establishing a dialogue with a view to creating a therapeutic relationship in which the person is a key partner [2].

McCormack and colleagues [3], for example, identified several values related to person-centred health care based on the assumption that human autonomy can be retained in the presence of debilitating illness and disability through partnership with nurses obtained by getting "close to the person", providing care that is consistent with the person's values, taking a biographical approach to assessment and ensuring a focus on ability, rather than on dependency.

Nurses' role in health teams

Sensitivity to the person's culture, values and beliefs is very important, particularly in today's diverse societies where there is no place for the 'one size fits all' approach. A person-centred approach recognises patients as experts on their needs and on their own experience of their illness. The nurse strives to "get inside the skin" [2] of the person by listening and establishing a dialogue with a view to creating a therapeutic relationship in which the person is a key partner. Coordination of services ensures care is organised within the same discipline and across several health disciplines [4]. Coordination enhances service efficiency and the effectiveness of outcomes. Autonomous clinical practice is no longer considered effective in achieving desired health outcomes.

In order to centre care on the person, competencies are needed in communication and assessment, counselling and behaviour change strategies, supporting self-management of illness and wellness, and in coordinating care across time and with other health professionals. ICN's Framework of Competencies [5] identify a cluster or set of skills, knowledge, judgements and behaviours that allows the nurse to deliver culturally appropriate and effective care.

The team approach is the cornerstone of person-centred health care and nurses have a major contribution to the functioning and effectiveness of health teams. In today's complex health care delivery systems it is impossible for any one professional group to provide person-centred care and wide consultations, linkages and referrals are needed to achieve desired health outcomes. All health care professionals have this responsibility, but nurses have perhaps the greatest opportunity as they work in many settings and are often the first point of contact for the public.

Nurses' role in and contribution to the health team is mandated by ethical and professional obligations. The *ICN Code of Ethics for Nurses* [6], for example, affirms that "the nurse sustains a co-operative relationship with coworkers in nursing and other fields". By their presence in varied health care settings and proximity to patient care, nurses are the link that holds health teams together.

Absence of nursing from policy

Despite the vital function of nurses to health team effectiveness and care outcomes, nurses are often absent from decision-making and policy matters. This nursing gap in policy participation can be a major barrier to effective health team functioning and impact on the quality of care.

Some studies suggest that nurses can waste time and energy solving problems of supply and equipment needed in day-to-day patient care that could be easily addressed through management support and nursing involvement in policy and decision-making [7]. That is why health systems need to be redesigned to optimise the nursing contribution to health teams in general and to personcentred care in particular.

ICN resources and policies on person-centred care

ICN has a long history of advocacy and support for patient-centred care. *ICN's Basic Principles of Nursing Care* [3] affirms that the nurse is only justified in deciding for, rather than with, what is good for the patient in highly dependent states such as when a patient is in coma. At all other times the rights, values, needs and preferences of people are paramount and must be used to tailor care to meet patient's specific needs.

ICN's policies and approaches put the person at the centre of care within the broader context of the family and community of which the person is an intrinsic part. For example the *ICN Code of Ethics for Nurses* [6] affirms the need for identifying and respecting the person's preferences, values, differences and expressed needs.

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Similarly, ICN's Framework of Competencies outlines nursing competencies that formulates a plan of care in collaboration with patients, clients and or carers.

ICN's policy paper on Informed Patients asserts that: "Nurses and other health professionals should work in partnership with patient organisations, self care groups and other interested parties to ensure that patients and the public have access to appropriate information about health and health services".

Similarly, ICN's policy statement on *Continuing Competence as a Professional Responsibility and Public Right* [8] calls for sharing decision-making and management of illness with patients, including adherence to medical and other regimens.

From policy to action

ICN's positions on patient-centred care are translated into action through its publications and guidelines. For example, *ICN's TB Guidelines for Nurses* [9] benefitted from the input of the Norwegian Association of Heart and Lung Patients, which made a valuable contribution to the sections on adherence to treatment and patient-centred approach to tuberculosis control and care.

ICN believes that access to current and validated information is vital in supporting patients and their families to make informed decisions about health and illness. That is why ICN, in partnership with the healthcare company Johnson and Johnson, launched a "Patient Talk" initiative that aims to improve health literacy of patients and engage them in therapeutic alliance with health professionals. The Patient Talk initiative provides useful resources for patients and patients' organisations. And in 2009, ICN published an updated version of Florence Nightingale's Notes on Nursing as a gift to the patients and family caregivers of today [10].

The preferred future

So what is the preferred future for person-centred care? Health professionals are seeing increasing evidence that person-centred care results in increased adherence to management protocols, reduced morbidity and improved quality of life for patients as well as in benefits measured through other health outcome indicators.

Increasingly, clinicians are advocating and implementing person-centred approaches with patient engagement. However, we need to move beyond

empowerment to self-agency, where patients are supported to become experts in their own health and illness matters, choices and decisions.

The question, then, for all of us is: 'how can we strengthen what is working well and overcome obstacles to patient-centred care?' Finally, the importance of enhanced communication between health professionals and patients remains a key priority and one which cannot be overemphasized. We need more time together, better communication skills development for health care providers and increased mutual consultation.

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