

IMPLEMENTATION OF PERSON CENTERED CARE IN A CARDIAC WARD

What happens when we ask patients about what matters to them regarding their stay at a cardiac ward?

Though difficulties to adapt fully to new routines, benefits were seen among all professionals.

AIM

To increase patients involvement by implementing PCC in the multidisciplinary team and to include the patient in designing his/her plan for the hospital stay and the care afterwards.

INTERVENTION

The project group, which consisted of professionals and patients, met on five occasions. They discussed how to study the experience of involved inward patients and how to study the experience of the professionals. The intervention was first tested for a test week in May 2016 and launched in October.

It consisted of:

- information to patients at admission
- enhanced enrollment dialogue with physician, nurse and assistant nurse
- written care plan, updated when necessary
- training for professionals

EVALUATION

The intervention was evaluated through a survey to patients and through 4 focus groups with professionals in multidisciplinary groups. The survey was issued 4 weeks before to 8 weeks after the shift Person Centered Care.

“It's a rather special kind of improvement, it is more about values and greater stuff than to just set up a new check-list...it's supposed to actually change our culture and make us think in another way and that's not simple things, it's difficult stuff...you couldn't expect to see notable things at once.

Physician

RESULTS

Though difficulties to adapt PCC fully into new routines, all professionals experienced benefits of PCC both for patients and professionals.

The professionals got a more comprehensive image of the patients' situation. Need for municipal home nursing was identified earlier and the contact with the home care therefore worked better. Although no change was seen in the overall experience of participation, patients estimated that the staff listened more to them after the introduction of person-centered care.

CONCLUSIONS

The patients sense of how well the caregivers had listened to them increased, and all professions agreed that it was valuable both for patients and staff.

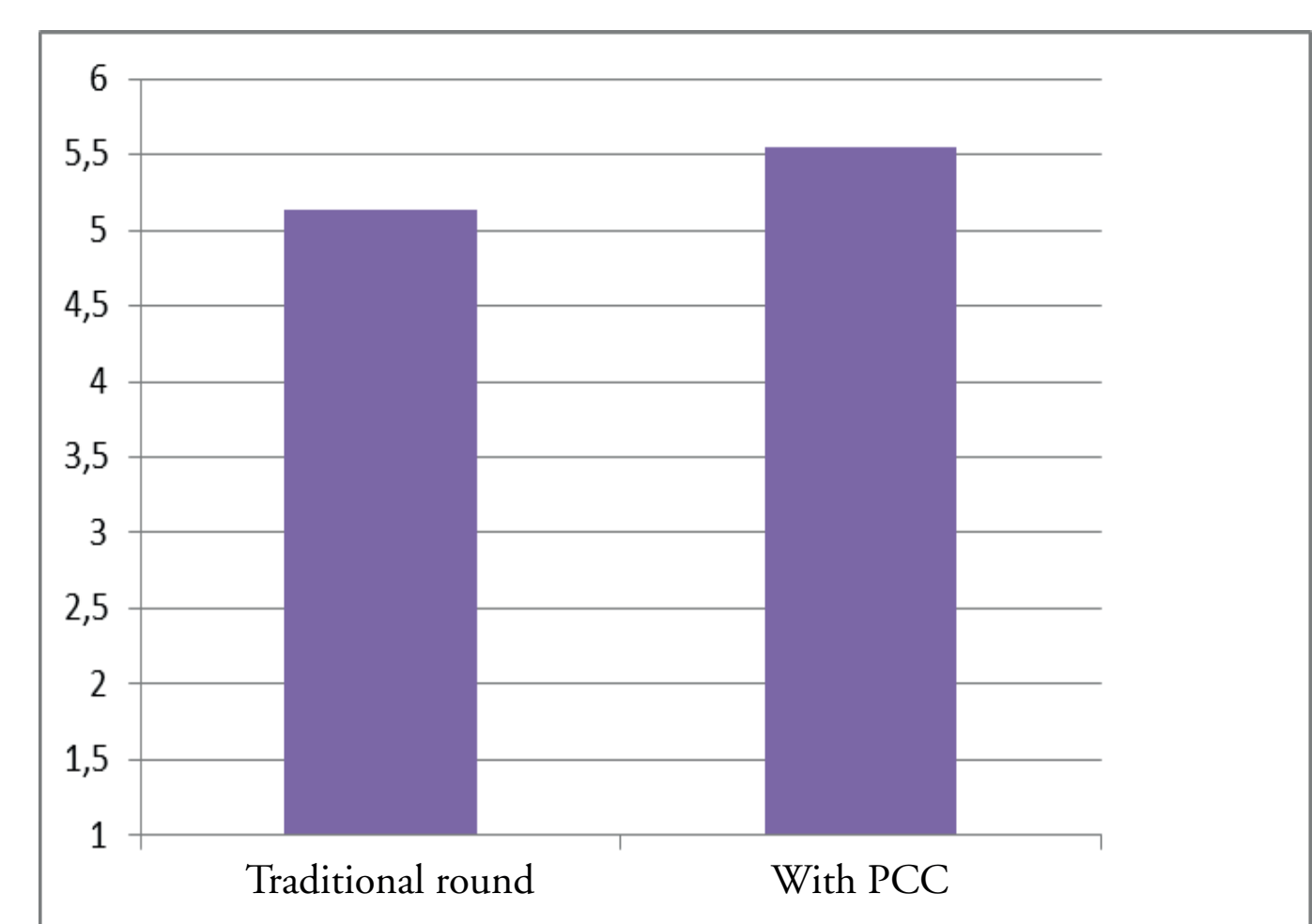
“You notice that when the patients are going home they feel much safer.

Nurse

“I feel that we're more involved now than we were before, as nurse assistants.



Instead of traditional rounds we met each patients early at their hospital stay to listen to the patients story and form a plan for their hospital visit and further care based on that.

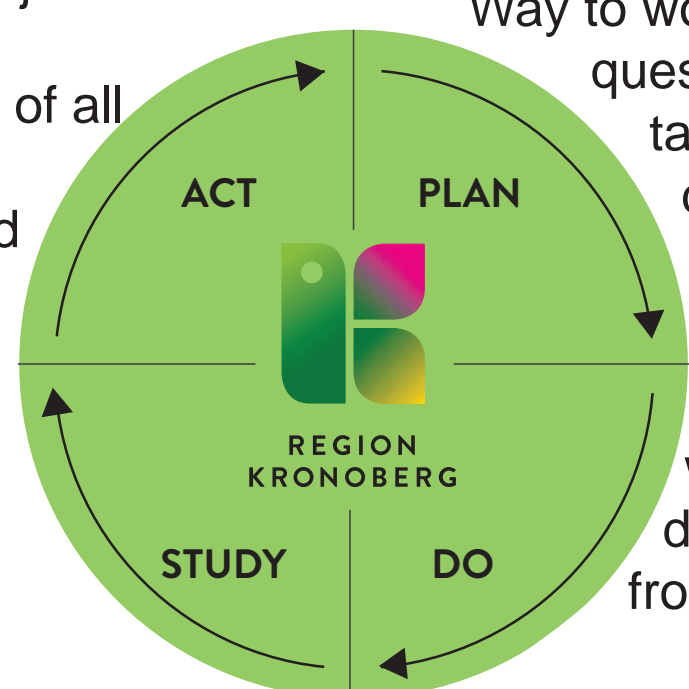


Patients sense of how well caregivers had listened to them.

TEST WEEK

Decision to go forward, since acceptance for the project was high.
Decision to education of all staff members.
Design of new method for documentation.

Better informed patients.
Fewer calls from patients beds to staff
Better contact with municipal healthcare.
Stronger sense of coherence within the staff.



Way to work and guide for questions and documentation of careplan during hospital stay were designed.

First tested for a week in half of the department by staff from the project group.

“

The contact with the municipals healthcare works more smoothly.
We always put up a specific date when the patient will be dismissed.
And there's more cooperation ... it works more smoothly ...

The patient feels that you listen to them, that they get a chance to say something.

SUMMARY

- Satisfaction with work increased among professionals
- Understanding of patients' situation improved among professionals
- The dismissing process were facilitated through earlier planning
- Patients' participation in the project group provided an image of needs that the professionals could not foresee by themselves.
- Further and deeper knowledge about patients' involvement needs to be provided to the professionals along the process
- Even though no objective difference in the patients total sense of involvement could be identified after the short period of time, engaging patients more and earlier in their process during hospital stay is considered valuable by all professionals.

Håkan Sjöstrand, Consultant Cardiologist
CONTACT: hakan.sjostrand@sll.se
WWW.REGIONKRONOBERG.SE