**Tips for Nurses: Person-Centred Care**

**What it is:** Person-centred care reflects the related concepts of dignity, worth and human rights. It sees care providers listening and responding to the needs and preferences of those in their care. In this way, person-centred care supports quality of life and enables people to live a meaningful life based on what they value.

**Why it matters:** Person-centred care is a key element of many national guidance documents including Standard 1 of the Aged Care Quality Standards, and the Aged Care Diversity Framework. Quality care is more than good symptom control and emotional support. It includes assisting the older person to live well and maintain self-determination, relationships, and social connections as their dependence on others increases.

**What I need to know:** Palliative care focuses on quality of life and includes dignity, respect, compassion and valuing the whole person.

Person-centred care:
- acknowledges uniqueness and individuality in care coordination and planning, and through shared decision-making and communication
- shows empathy and respect
- is professional care that respects autonomy, dignity, privacy, relationships, and the rights of the person
- identifies strengths and positive aspects, rather than weaknesses and problems
- has a holistic focus that acknowledges the person’s lived world and what they and others important to them value about their life.

Helping people retain dignity as they die includes:
- symptom control
- psychological and spiritual support
- care of the family.

Language and terminology are very important.

**Actions**

**Always greet** the person and introduce yourself. Let them know why you are there. Ask their permission to interact with them, provide care or undertake any procedure.

**Always give** the person your full and complete attention.

**Respect** a person’s need for privacy.

**When speaking** with the person try to be seated at the person’s eye level when possible.

**Address** people by their preferred name and avoid pet names or generic terms like ‘love’ or ‘dear’.

**To promote** a sense of dignity, value people as the person they are, rather than just the illness they have.

**Ask** questions such as:
“What should I know about you as a person to help me take the best care of you that I can?”

“What are the things at this time in your life that are most important to you or that concern you most?”

“Who else should we get involved at this point, to help support you through this difficult time?”.

**Implementing** a person-centred approach to care is more likely to succeed when management demonstrates a person-centred approach to staff.
My reflections:

What can I do when speaking with an older person that would make them feel valued and listened to?

What situations have I observed that have not been person-centred or preserved dignity? What could I do to improve things, so this doesn't occur again?

My notes:

See related palliAGED Practice Tip Sheets:
- Advance Care Planning
- Case Conferences
- People with Specific Needs

For references and the latest version of all the tip sheets visit www.palliaged.com.au