



May 2016

Person Centred Approaches to Care and Support

Background:

The National Mental Health Consumer and Carer Forum (NMHCCF) believes there is a need to articulate what being person-centred means and what constitutes person-centred care or person-centred approaches to care and support from the perspective of the informed consumer and family/support person.

'...personalisation is generally understood to mean a culture in which citizens are able to shape the services they need, with choice and control, so that support fits the way they wish to live their lives'¹. This is a step further than traditional "person-centred approaches".

People living with mental health issues and their families /support people promote person-centred approaches toward both physical and mental health including housing, social services and allied supports. We believe there is a great benefit for consumers in developing a personalised service response including respectful and reflective listening leading to improved empathy and understanding of people experiencing mental health issues and accompanying emotional distress. We also believe that all mental health clinicians and support services should be well-versed in the elements of self-direction, independence and community inclusion for the people they treat/support. The concept of person-centred treatment and support must be embedded in policy and service framework.

Within new and existing service models and systems it is imperative that those supported will have person-centred care to meet their needs and gain and maintain their sense of hope. If this is done in a sensitive, genuine and responsive way it will create systems of support that by their very nature will be recovery-oriented, promote self-determination, assist in suicide prevention and respond to needs before issues reach an acute or critical phase.

Philosophy of person-centred care and support: In essence, the philosophy of person-centred support is summed up in two words - dignity and respect. Curtin encapsulated this when he wrote we*'are human beings, our patients or clients are human beings, and it is shared humanity that should be the basis of the relationship between us....'*²

Defining Person Centred Care and Support

1. Putting the person at the centre of his/her treatment, care and support
2. Person centredness and person-centred thinking can be a philosophy, a way of thinking or mindset which involves viewing, listening to and supporting a person based on their strengths, abilities, aspirations and preferences and supporting their decisions to maintain a life which is meaningful to them. Such a mindset or way of thinking is essential to the development of a 'person-centred plan' and the provision of 'person-centred support' in conjunction, wherever possible, with their families'/support people.
3. When embraced, the concept of person-centred treatment, care and support can lead to beneficial and meaningful changes to a consumer's mindset and also that of family and support persons. It will also enhance the way in which clinicians and services providers deliver their care and support and lead to a flexible and responsive framework that places the people they serve at the centre.

Peer workers contribute to person-centred care and support; Peers offer mutual understanding based on shared experiences. It is difficult for clinicians and allied services to completely understand the effect of total disempowerment and therefore peers can play a valuable part in contributing to person-centredness.

Genuine participation of consumers and carers and their families / support people in person-centred modalities contributes to improved cultural change and increases the probability of positive systemic reform through the implementation of service and system improvements. These will have been instigated by the recommendations formed by our collective experience and acknowledgement of our practical expertise. Person-centred focus in service provision is more recovery-oriented and enhances a person's recovery and well-being leading to improved interactions, enhanced service quality and innovative developments.

Key Points:

Person-centred approaches require that clinicians/services remain focused on the individual rather than the service. This means:

- Being aware of where the individual is at now, especially in terms of his or her journey, dreams and goals;
- matching the services or support with the person's needs rather than the other way round;
- the opposite of "one-size-fits-all";
- not fitting the person into predetermined "packages"; and
- looking at a person's capacities and strengths and always dealing with each person as an individual ².

Recommendations:

- That the concept of *person-centred care* is realigned to become *person-centred approaches to care and support*. The rationale for this is that mostly consumers are not in *care* environments. When consumers, carers or family members seek assistance, intervention or support, we are usually engaged in our everyday life not in care or in a clinical environment.
- That person-centred training opportunities be made available to consumers, family and support persons to enhance their lived experience and facilitate their inclusion as *bona fide* paid peer experts.
- That clinicians and service providers develop person-centred treatment and service responses to improve interactions and understanding of people experiencing mental health issues and/or emotional distress.

References

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2. T Lester, J Meagher, P Nadin, M Orr M (2013), *Good Practice Guidelines for Person-Centred Planning and Goal Setting for People with Psychosocial Disability*, Practical Design Project Fund, Disability Care. Richmond PRA, Sydney.

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Nominated NMHCCF contacts:

Peter Dillon
Janet Meagher AM

Please contact NMHCCF Secretariat

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