



COMMENTARY

Person-centred care: a personal view

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A nurse wrote to me today to say her ‘road to success is under construction’. And I can see that is true of her personal and professional development, although as a critical friend I felt compelled to remind her that there won’t be just one ultimate success in her life, but that the road will be populated by numerous milestones of achievement. There will be other milestones too: they might be failures, barriers or setbacks but they are all important points of learning that will help her develop and move forward.

The same is true of practice development – there is no ultimate success to aim for but counting the milestones will help us keep moving along the road. So as the new chair of FoNS, I am delighted and intrigued to discover more about the *International Practice Development Journal*. And even more pleased to discover it is open access – for both authors and readers. It’s exactly the sort of resource to which I should point my correspondent in order to help her develop practice in her organisation, provide evidence for change and build the confidence she needs to develop herself professionally and personally.

In scanning the contents of the *IPDJ*, I saw a recent article about the state of the art of person-centredness (McCormack et al., 2015). It struck me while reading it that, even now, there needs to be a greater convergence between person-centred care and practice development. Not surprisingly, the authors suggest that one goal of person-centredness should be the individual’s ‘involvement with care’ and that ‘shared decision making’ is an integral part of that: an unarguable axiom (p 3). Recent experience has shown me how important it is that person-centredness should start with the individual being part of decision making about their care, even before that care is planned. While doing some recent ‘mystery shopping’ supporting a loved one on a pathway of treatment at a well-regarded centre of excellence, it became obvious that a degree of person-centredness is being exercised but it’s not complete. The biggest impediment to communication and decision making is that the person at the centre of the disease process and on the care pathway is not really part of the multidisciplinary team and certainly not present at its discussions. The mantra ‘no decision about me, without me’ was central to a government publication (Department of Health, 2012) but it still doesn’t seem to be the norm in practice. This flaw in the care pathway has, because of various confused messages, resulted in high levels of stress for the individual with a resultant erosion of trust in the judgement of professionals. The whole situation could have been avoided if the clinicians had kept the individual in mind rather than the disease. Relationships are healing but it will take time.

The practice development road will be never ending but I am delighted this journal is a stimulus and resource for all stakeholders to exercise their leadership on this shared journey, whether they are newly registered staff, experienced practitioners, academics, researchers, educators or policymakers.

References

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