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Principles of Health and Social Care Practice (BMHP5002_LON)

Assessment Component 2

Individual Written Report

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Learner declaration

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Introduction

Previously, care in hospitals was approached traditionally where the patients goes to the doctor; gets diagnosed, prescribed for medicine and told to buy the medicine in the pharmacy. Basically, the approach was focused on treating the disease and reducing the symptoms instead of putting emotional well-being of the patient into consideration. The patient then decides to buy the medicine or not, depending on affordability. The traditional approach limited relationships between the doctor and the patient. However, care has now moved from traditional care to Person-centred care approach and incorporated in Health and Social Care Act (2008) regulation 9.

Person-centred Care is the new approached meant to improve on the limitations of the traditional approach of health care. Under the person-centred care approach, care is aimed at improving the quality of care based on two aspects; prevention and treatment of mental and physical illness as well as helping the patients to attain satisfaction. (Cogne, Holmstrom, & Soderback, 2018). This is done by focusing on the elements of care, support and treatment which are important to the patient, family members, and care providers. This approach aims at putting patients first, educating them, listening to them, and considering their expectations. Person-centred care emphasizes that health and social workers should look beyond symptoms by considering preferences, values, cultural traditions, and socioeconomic conditions to help the patients achieve their expectations. (Department of Health, 2010). The principles of Person-centred care include emphasize that; care should be provided with dignity, compassion and respect; care should be collaborative, coordinated and accessible care, treatment and support, as well as offering personalized care, treatment and support. (Department of Health, Social Services and Public Safety, 2011). Person-centred care approach also asserts that there should be shared decision-making between the patients, families and the care providers while providing health care.

Description/Analysis

Policies of person centred care

Social inclusion

According to Care Quality Commission; Health and Social Care Act 2008, Regulation 9 asserts that all patients should be treated equally without any exclusions from person centred care. Social inclusion should be based on diversity and equality where every service user must be given the opportunity to participate in the decision making of their care whenever they want to. (Levy-storms, 2013) The policy of diversity and equality puts all the patients and their families at the centre of planning and support. Person centred care is based on the policy that all patients should be allowed to join social events that important for them to gain self-actualization. (Chapman, 2017). Public Health England is enforcing the policy of equality and diversity through Health Equity Assessment Tool. (HEAT).

Collaboration between professionals and service users

According to Department of Health (2010), person-centred care is run on the policy that there should be collaboration between the professionals and service users. This is done through shared decision making where the professionals help the patients to make informed decision by teaching them and guiding them on the best possible decision. Professionals are encouraged to have teamwork with their clients to encourage them make right decisions, and should consider the patient's views. (Wallstrom and Ekman, 2018).

Customized Care

Person-centred care is customized to the patient's needs, preferences, values, and resources available to them. After assessment of the needs, it is a policy in care homes to make an individual care plans for every patient under care where all the shared, and agreed upon decisions are recorded. The resources of the patients should be put into consideration including; knowledge, skills, capabilities, and their social network. (McCormack, 2011). According to the Health and Social Care Act (2008) regulation 9, care should be customized to be appropriate, meet the needs and reflect the preferences of the patients.

Early discharge policies

Person centred care approach puts the patient at the centre while making discharge decisions. For example, a patient has a right to be discharged earlier before the

scheduled date and should be given follow up care to ensure they attain their maximum capacity. On the other hand, the patient should never be forced to be discharged early even if they seem fine without their consent as stipulated in the Health and Social Care Act 2008 (Regulation 2014) regulation 11.

Safe care treatment

Person centred approach puts all the patients in a safe position by guiding that care and treatment should be provided safely by considering cultural background, preferences and beliefs. The patients also should be safe guarded from any form of abuse, segregation, and improper treatment as guided by Regulations 12 and 13 respectively of the Health and Social Care Act (2008).

Person centred approach associates with many ethical values like;

Ethical values and ethical issues

Confidentiality of patients

Care providers should keep information of their patients confidential. It is unethical of the care provider to disclose patient's information to third parties without his/her permission and consent as guided by the Data Protection Act of 2018 of United Kingdom. The patients should also be accorded the right to privacy especially when administering personal care. (Fors et al., 2018)

Dignity and Respect

It is ethical to treat patients with dignity and respect at all times. Respect relates to their decisions, their rights, their needs and their mental capacity as well as showing them dignity in all aspects according to the Health and Social Care Act (2008) regulation 10.

However, it is also true that some patients make decisions that compromise the ethical behaviour of their care providers; because they limit the health professional from providing health care in the best possible manner due as they try to respect decisions of their patients. For example, the patient may prefer using certain drugs yet they would have negative impact on him given the age, health and mental illness.

Some patients are racists and this makes it hard for their care providers to provide care in the best possible manner with respect and dignity. It poses an ethical dilemma for a care giver to be respectful and fair to a patient who is behaving the contrary.

Professional conduct

Care Quality Commission gives great importance and guides staff to demonstrate highest standards of professional conduct, impartiality, honesty and integrity. However, some staff members in health and social care face ethical dilemma to disclose any activities or situations that would rise to conflict of interest due to the fear of losing their jobs because some conflicts of interest do not allow you to be employed in health and social care service. For example, some staff fear to disclose their criminal records because it conflicts with their ethics and integrity.

Fairness and equality

Health and social care workers should work ethically by being fair to all the patients and ensuring equality. (NICE, 2009). However, it becomes very difficult for health and social care workers to act fairly because some patients have a bad character of being rude, abusive, vulgar and refuse to cooperate. This eventually compromises their ability to act fairly and empathically.

Theories that guide person centred care

Carl Rogers' person-centred therapy

According to this theory, Carl Rogers suggested that all humanistic therapies should be person centred by handling the patients with warmth and care to understand behavioural and psychodynamic approaches. Rogers (1959) asserted that there should be a great interpersonal relationship between the care provider and the service user to enable positive outcomes through self-healing and in turn achieve self-actualization. Rogers suggested that a care giver should be kind, warm, genuine and understanding to the patient considering the fact that the patient wants to achieve good health and therefore should be assisted to achieve that. (Rogers, 1951).

Social cognitive theory

In addition to Rogers' theory, social cognitive theory also recognizes the need for person centred care. This theory explains and guides care providers to understand the influence of experiences, actions of others, and environmental factors on the current behaviour of the patient under assessment. The theory explains that care provider should be aware of patients' expectations and should work closely to helping them attain positive expectation. The patients with behavioural capabilities to make decisions should be given a chance to be at the centre of the decisions as far as their care is concerned. In addition, self-efficacy should be considered by understanding that patients have individual beliefs that they can control their

behaviour. This reflects confidence in the patients to control their behaviour for the better. (Kim and Park, 2017).

Benefits of person centred care

Mutual understanding and teamwork

Person centred care has helped promote a mutual understanding and team work between the care professionals and the patients with their families and care networks. This teamwork and mutual understanding helps to promote the principle to provide best health care in the best possible manner since the needs, preferences, and cultural backgrounds of the patient are clearly understood and considered. (Wallstrom and Ekman, 2018).

Improved choice and decision making

Person centred care has improved on choice and decision making in the process of providing and receiving care. This is because person centred care involves shared decisions while making choices of care to be provided. (Fors et al., 2016). The shared decisions include; selection of meals and meal times, selecting social events, and selecting care among others.

Satisfaction for patients and their families

According to Janson et al. (2018), person centred care promotes patient's satisfaction because the care under this approach is customized to fit patient's preferences by taking into account resources available like knowledge, capabilities, social networks among others. This enables them to achieve satisfaction and self-actualization as noted by the social cognitive theory.

Promotes self-confidence and self-esteem

Person centred care puts the patients at the centre by giving them an opportunity to fully participate in their own care. This is because the social worker is supposed to allow patients to fulfill their maximum potential, allowing them to do what they want to do with the support and guidance of the professional worker. Giving them such chances helps patients to be confident due to the kindness and compassion from the care providers. (Koren, 2010).

Improved resource allocation in the facility

Person centred care leads to better resource allocation in health care facilities like care homes because the patients know exactly what they want, and therefore no need for gambling with resources. (Li and Porock, 2015) Resources like machines,

medicines, time, meals among others are allocated exactly where they need to be.

Application of person centred care to dementia patients

Resident Focused Care plan

Name of Patient: John Books

Provider: Richard K

Date: 20/8/2021

Problem/ Need	Goal	Intervention
❖ Short term memory ❖ Confusion ❖ Disorganized speech ❖ Troubled sleeping (strange dreams)	To provide personal and emotional support to Mr. John to assist him overcome his challenges	❖ Showing calendar events ❖ Personal Care Support like bathing, using a toilet, washing, feeding and sleeping ❖ Taking him for social events ❖ Morning and evening walks

A person with dementia should be handled with dignity and respect because they are usually elderly patients who really deserve the respect. This can be done by protecting them from falling, supporting them to dress up, covering them whenever they are sleeping and ensuring that safe from embarrassment.

These elderly dementia patients like John are usually confused and therefore fail to understand and reason out things. It is therefore the role of the care worker to show empathy while speaking to him by using a lower tone, speaking calmly, maintaining eye contact, and avoid shouting at them. This will help Mr. John to comprehend and understand things regarding his care.

Mr. John is an elderly person who needs personal support to perform several personal tasks. He needs help with using the toilet, washing, and sleeping. He has a

shortly memory and sometimes forgets whether he has taken meals and medication. (Levy-storms, 2013) The care worker needs to closely monitor John and records all the short comings and progress made on a daily basis using the care plan.

Dementia patients sometimes fail to choose the meals they want to eat. The best approach to use centred on John is to show him pictures of foods to enable him make a better choice or choose the food they usually enjoy and those that best fit their health demands in an appropriate manner. Meal planning in a care home is very important because it helps solve malnutrition issues in the residents. (Kumar and Chattu, 2018)

A dementia patient like John may experience some pains in the joints because of old age. A care worker like Richard should comfort the pain and administer treatment help him manage his pain. This should be by being warm, kind and understanding to ensure that Mr. John feels comfortable and loved in the care home.

Mr. John has trouble sleeping because he experiences strange dreams since he was a military man, and due to the physical changes in the brain. A care worker like Richard should help Mr. John to have a sound sleep by sharing with him life stories, reading books for Mr. John, and calling experts in case all these fail. (Kogan, Wilber, & Mosqueda, 2016).

Limitations of Person centred Care

Person centred care increases on the level of stress and anxiety on the side of health and social care workers because they have to be fully dedicated and personally involved with their patients. This involves dedicating time, understanding and living with bad characters of patients which increases on levels of stress, and anxiety. (Batson, 2011).

Person centred care also poses the risk of compassion fatigue. This is because excessive engagement with patients involves showing too much care, too much empathy and compassion which leads to compassion fatigue. (Hansen et al., 2018). This will in turn lead to demotivation among the health and social care workers.

Person centred care approach focuses on satisfying the patient and their families ignoring the efforts, feelings and goals of the care providers. It aims at promoting physical and emotional wellbeing of the patients ignoring the emotional wellbeing of

those that provide care especially in the care homes.

According to Batson (2011), person centred care leads to unfairness due to empathy because some patients get more attention than others as a way of being empathetic.

Conclusion

This study has revealed a great importance of person centred care in the health and social care sector in the four UK countries; England, Scotland, Wales, and Northern Ireland basing on the positive health outcomes associated with this approach; improved resource allocation, improved choice and decision making, mutual understanding and teamwork, improve resource allocation, and satisfaction for patients and their families to mention but a few. The study also revealed that this approach is best for patient's satisfaction foregoing the interests, feelings, and professionalism of the care providers. With this challenge, the care providers find themselves facing ethical dilemmas as they follow principles, policies and regulations of person centred approach, and achieving their objectives and interests. By and large, person centred approach care is best approach to take to achieve high quality and social care.

Recommendations

I recommend a lifestyle for Mr. John enriched with physical activities, music and art to help him achieve his memories, and to avoid the confusion due to idle lifestyle. Social interaction will connect Mr. John to many elders with similar experiences and health conditions which help him become more active, and motivated to achieve his maximum potential. (Department of Health, 2010).

I recommend sleeping pills for Mr. John since he has no other major health problems like cardiovascular diseases. However, they should be given to him on only those occasions where sleep has completely refused. The sleeping pills will enable him get a better and sound sleep and he will not experience strange dreams during the sleep. (Alzheimer's Association, 2018)

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