Beyond ‘Patient-centred care’: Applying the ‘Senses Framework’

by
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Kings Fund, November 2012
I NEVER WANT TO SEE YOU AGAIN, CHARLIE BROWN! DO YOU HEAR ME?

NEVER! NEVER! NEVER!

DEFINE, "NEVER"
The challenge ahead

• Rise in long-term conditions the greatest challenge to health and social care systems (Kane 2005)

• Health care systems still mainly focussed on acute care

• Social policy is underpinned by an individualistic view of society

• Need for a change in values and a new model of service delivery

• Relationship-centred care/Senses Framework
Time to question our values

• Independence, well-being and choice
• ‘Cultural glue’
• Consistent with other concepts in academic and policy literatures
• Successful ageing
• Autonomy and independence
• What of interdependence?
• Is Person-centred care appropriate?
Successful ageing: What’s not to like?

How is success defined?

• Three requirements for successful ageing
  - Avoidance of disease and disability
  - High levels of physical and cognitive functioning
  - Active engagement with life (Holstein and Minkler 2003)

• Use of term successful itself is problematic as, by definition, it casts those who do not ‘measure up’ into the alternative ‘unsuccessful’ category

• Constitutes the ‘new ageism’ (Holstein and Minkler 2003) based on a vision of the ‘super-aged’ (Feldman 1999)
The roots of ‘person-centred’ care

- Pioneering work of Tom Kitwood, Bradford Dementia Group – Dawn Brooker
- See the person not the disease
- Creating a positive environment of care
- Original vision not consistent with current usage
- Little more than a political slogan

(Burstow 2006)
Person-centred care – mantra of the moment

- Care that is based around an individual and their needs (DoH 2001)

- Key values underpinning the ‘single assessment process’ are person-centred care and independence (Norman 2005)

- Assessment is a person-centred activity with an emphasis on establishing areas of need to maintain or increase independence and quality of life (McCormack and Ford 2000)
I missed school yesterday because I had a cold...

There must be something going around... lots of kids have been getting colds...

Mine was a lot worse, though...

Why?

Because it happened to me!
What of autonomy and independence?

- Beware the ‘new gerontology’ with its focus on ‘individually successful ageing’ that results in an impoverished view of what a good old age can be’ (Holstein and Minkler 2003)

- Autonomy and individuality are ‘incapable of underpinning any shared societal responsibility for the health of all its members, including the least advantaged’ (Evans 1999)

- Need a relational view of autonomy that recognises that people are never fully independent (MacDonald 2002)
The Senses Framework and relationship-centred care

- Developed over a 25 year period
- Intellectual itch
  - What provides a sense of therapeutic direction for staff in LTC environments?
- Cure
- Rehabilitation
- ‘Good geriatric care’ (Reed and Bond 1991) or ‘Endless residual care’ (Evers 1981)
Creating an ‘enriched environment’

- Security – to feel safe physically, psychologically, existentially
- Belonging - to feel part of a valued group, to maintain or form important relationships
- Continuity - to be able to make links between the past, present and future
- Purpose - to enjoy meaningful activity, to have valued goals
- Achievement - to reach valued goals to satisfaction of self and/or others
- Significance - to feel that you ‘matter’ and are accorded value and status
Creating the right environment for others to grow?

- Not just ‘others’ but everyone

‘If employees are abandoned and abused, probably clients will be too. If employees are supported and encouraged they will take their sense of well-being into their day-to-day work’.

(Kitwood 1997)
The Therapeutic Quadrangle

(Crolland 1988)

CARER

FAMILY

PROFESSIONAL

CARED-FOR PERSON

ILLNESS/DISABILITY
Beyond ‘patient-centred’ care?

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Most of us have to be satisfied if we just look good at a distance.