

RNAO Best Practices: Evidence Booster

Best practice guideline implementation leads to improved satisfaction among residents and families

Person- and Family-Centred Care (2015)



RNAO's best practice guideline (BPG) *Person- and Family-Centred Care (2015)*⁴ (PFCC) is to be used by nurses and other members of the interprofessional health-care team to enhance the quality of partnerships with individuals accessing care. The result is improved clinical outcomes and enhancing the person and family's experience of health care through the use of evidence-based practices.



Championing Change



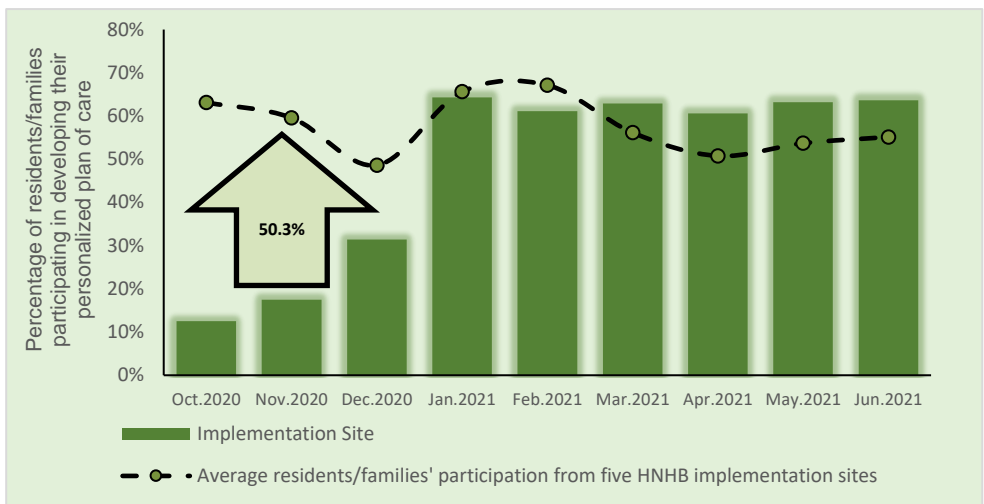
The Behavioural Supports Ontario (BSO) Provincial initiative was created to enhance health-care services for older adults in Ontario with complex and responsive behaviours associated with dementia, mental health, substance use, and/or other neurological conditions. The Hamilton, Niagara, Haldimand, Brant BSO team currently supports 86 long-term care homes by providing consultative non-pharmacological recommendations to support resident centered care approaches to reduce or mitigate these behaviours through capacity building.

Aim: To examine changes in resident and family involvement in developing a personalized care plan and their satisfaction with their involvement in their care and treatment planning when implementing RNAO's BPG, *Person- and Family-Centred Care (2015)* through the work of the HNHB Behavioural Supports Ontario, Canada.

Measures: The Nursing Quality Indicators for Reporting and Evaluation® (NQuIRE®) data system was used to determine (a) the percentage of residents and families participating in developing their personalized plan of care and (b) percentage of residents and families who are satisfied with their involvement in the planning of care and treatment.

Clinical improvement: Noted an increase in the percentage of both measures.

Figure 1: Percentage of residents and families participating in developing their personalized plan of care (assessments completed during referrals)



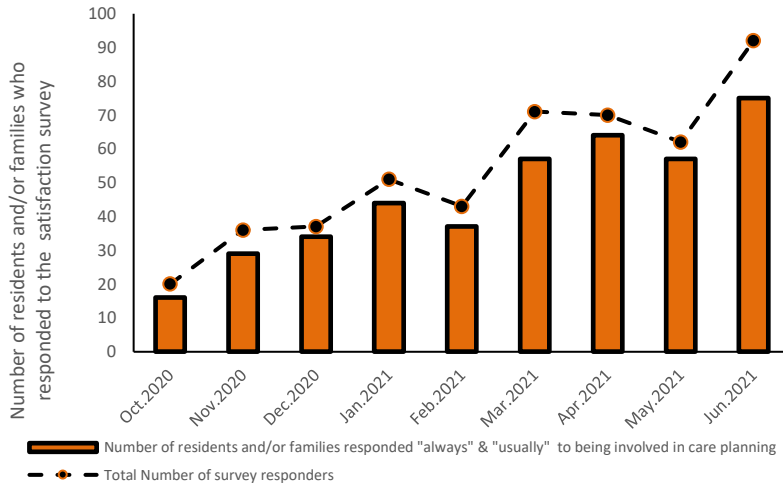
Impact: There was a 50.3 per cent increase in the residents and families participating in developing their personalized care plan for one site. Data shows an upward trend within three months of BPG implementation. Data remained consistently above HNHB BSO's (i.e. five implementation sites) average since January 2021.

Practice changes

HNHB BSO regional team is a Long-Term Care Best Practice Spotlight Organization® (LTC-BPSO®) implementing the PFCC BPG as of April 2020. Several practice changes were included to build the team's capacity to develop therapeutic relationships with residents and families. A survey was developed to gather feedback from residents and their families about their level of involvement in care planning as well as their satisfaction and experiences with BSO services.

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Figure 2: Number of residents and families satisfied with their involvement in care and treatment planning



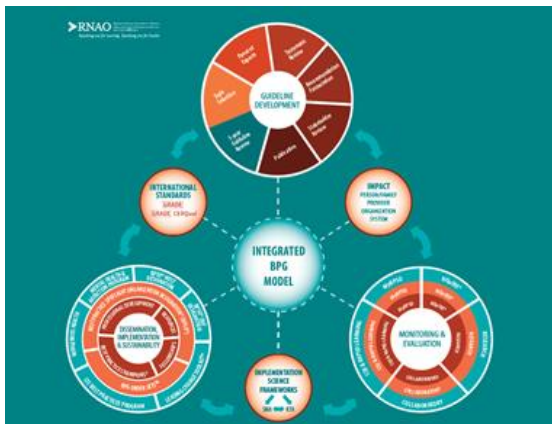
Practice changes

The HNHB BSO Person and Family Centered Care working group reviewed current documentation practices and provided revisions and updates to prompt staff to include families in care planning. For example, the *I Am Who I Am* and P.I.E.C.E.S. tools were reworded to guide staff to enhance resident and family involvement as they gathered the information and completed the assessment forms. The assessments ensure resident or family involvement and that they are included in the discharge from services plan.

A BSO High Five program was also launched to recognize front-line workers who have demonstrated a person-and family-centered approach to care. In addition, as part of the therapeutic supplies funding through HNHB BSO, tablets and laptops were acquired to decrease isolation and to help residents communicate with their families during the COVID-19 pandemic.

Impact: There was an 80 per cent increase in residents' and families' satisfaction with their involvement in the care and treatment plan at the five implementation sites. Survey results from five HNHB BSO implementation sites demonstrated that residents and families responded "Always" and "Usually" to being satisfied with their involvement in the care and treatment planning.

Conclusion: These analyses demonstrate that implementation of recommendations within the *Person- and Family-Centred Care* (2015) BPG led to a dramatic increase of satisfaction among residents and their families when involved in their care and treatment plan.



RNAO launched the BPG Program in 1999¹ with funding from the Government of Ontario, Canada. The evidence-based BPGs developed to date are transforming nursing care and interprofessional work environments in all sectors in health systems worldwide. BPSOs are health service and academic organizations that implement multiple BPGs through a formal agreement and systematic process, as well as evaluate their impact on health and organizational outcomes².

NQuIRE^{2,3}, a unique nursing data system housed in the International Affairs and Best Practice Guideline Centre, allows BPSOs worldwide the ability to measure the impact of BPG implementation. The NQuIRE data system collects, compares, and reports data on human resource structure, guideline-based nursing-sensitive process, and outcome indicators. Contact: NQUIRE@RNAO.ca for more details. To learn more about RNAO's IABPG Centre, please visit RNAO.ca/bpg.

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