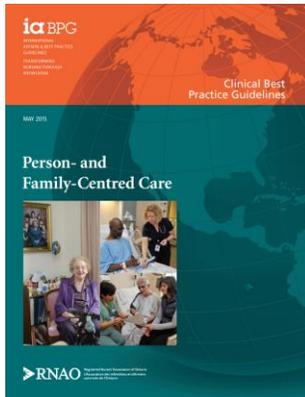


RNAO Best Practices: Evidence Booster

Implementation impact: *Person- and Family-Centred Care* best practice guideline

Person- and Family-Centred Care (2015)



The purpose of this best practice guideline (BPG) is to promote evidence-based practices associated with person- and family-centred care (PFCC), and to help nurses and the interprofessional team acquire the knowledge and skills necessary to become more adept at practicing PFCC.



Southlake Regional Health Centre (Southlake) is a hospital located in Newmarket, Ontario, Canada. Southlake delivers a wide range of health-care services to the communities of northern York Region and southern Simcoe County. A team of nearly 6,000 staff is committed to continuously improving the quality of the care they deliver to individuals, families and the community. Southlake is a Best Practice Spotlight Organization® (BPSO®), as well as part of the Southlake Community BPSO Ontario Health Team. Their goal: To provide a seamless and coordinated system of care that focuses on the needs of persons and related outcomes. This includes improving access to care, reducing wait times and making sure persons receive the appropriate care at the right time and place.

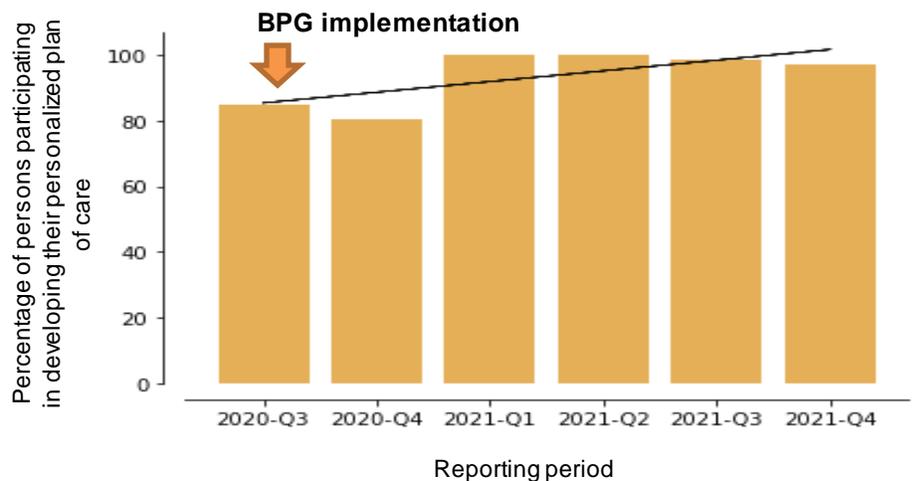
Aim: To examine the clinical outcomes associated with the implementation of RNAO's *Person- and Family-Centred Care* (2015) best practice guideline (BPG) in the musculoskeletal unit at Southlake Regional Health Centre.

Measures: The Nursing Quality Indicators for Reporting and Evaluation® (NQUIRE®) data system was used to determine the percentages of persons:

- participating in developing their personalized plan of care
- satisfied with their involvement in the planning of care and treatment

Clinical improvement: There were increases in both the percentage of persons participating in developing their personalized plan of care and the percentage of persons satisfied with their involvement in the planning of care and treatment.

Percentage of persons participating in developing their personalized plan of care in the musculoskeletal unit



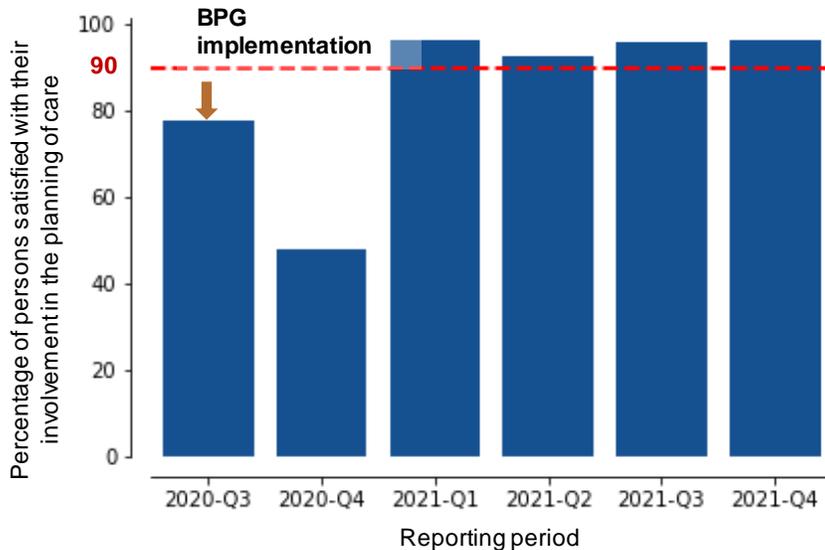
Impact: From 2020 to 2021, there was a relative increase in the percentage of persons participating in developing their personalized plan of care by 23.9 per cent (from 77.8 per cent to 96.4 per cent).

Practice changes

Person- and family-centred care (PFCC) interventions were addressed during hospitalization and post-discharge. Southlake also redesigned interprofessional assessments to incorporate person-centred language. For example, the language of PFCC was implemented in referring to a patient with a clinical diagnosis, such as saying "Patient who had appendicitis" rather than "The appendicitis patient." And, Southlake started asking for preferred pronouns during admission and using "care boards" to display them. By emphasizing PFCC principles – especially during bedside handovers – these changes contribute to more person-oriented care. Other changes included a thorough revision of surveys for persons receiving care, with a view to boosting the relevance of survey questions to persons and families.

RNAO Best Practices: Evidence Booster

Percentage of persons satisfied with their involvement in the planning of care and treatment in the musculoskeletal unit

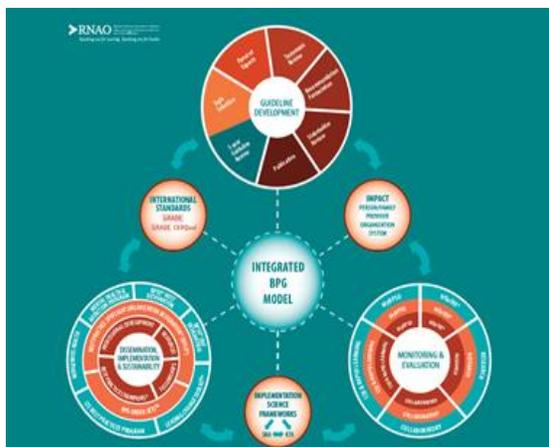


Impact: From 2020 to 2021, there was a relative increase in the percentage of persons who reported satisfaction with their level of involvement in the planning of their care and treatment, by 15.3 per cent (from 84.9 per cent to 97.9 per cent).

Southlake has also enhanced the following supports and structures to ensure fidelity of the PFCC initiative and continuous quality improvement:

- **Staff feedback:** Various evidence-based recommendations were piloted, and input from staff was sought to identify which recommendation to implement.
- **Staff education/training:** Orientation training was revised to incorporate PFCC elements including empowerment, person-centred communication and shared decision-making.
- **Champion engagement:** Champions were equipped to support cultural diversity and PFCC principles. The training emphasized heightened PFCC awareness and fostered a strong connection to drive meaningful change.
- **Auditing:** Regular audits included monthly reviews of PFCC survey results and clinical documentation. Managers and directors were promptly notified of the audit findings.

Conclusion: Southlake demonstrated that the implementation of RNAO's *Person- and Family-Centred Care* (2015) BPG led to an increase in both the percentage of persons participating in developing their personalized plan of care and the percentage of persons satisfied with their involvement in the planning of care and treatment.



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 us by email at NQUIRE@RNAO.ca for more details. To learn more about RNAO's IABPG Centre, please visit RNAO.ca/bpg. This work is funded by the Government of Ontario. All work produced by the RNAO is editorially independent from its funding source.

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