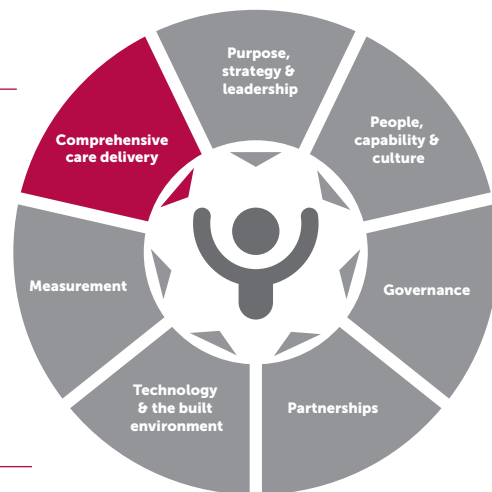


## Fact sheet 2: Person-centred organisations

# Attribute: Comprehensive care delivery



## A fact sheet for governing bodies and managers

This fact sheet provides information about one of the seven key attributes of high-performing person-centred healthcare organisations - **Comprehensive care delivery**.

All attributes are interrelated and should be considered together as a framework for achieving great person-centred care.

This attribute focuses on the application of person-centred care principles in every interaction with the patient, their carers and family, with the aim of delivering comprehensive care.

Comprehensive care is about aligning the delivery of care with the patient's expressed goals of care and healthcare needs. It considers the effect of the patient's health issues on their life and wellbeing, and is clinically appropriate. This involves effective communication, coordination of care across teams, and ensuring diversity and equity are respected and supported.

### Key elements

- Patients are engaged as partners in their care
- Goals of care guide clinical decisions and the patient journey
- Diversity and equity are respected and supported
- Transparency is a core element of safe, high-quality care

“Person-centred care is about creating the conditions where a patient can be the expert in their own needs and care.”

Executive,  
Riverland General Hospital

## Is my organisation achieving this attribute?

Element	What can this look like?	Reflective questions
<p><b>Patients are engaged as partners in their care</b></p>	<ul style="list-style-type: none"> <li>• Communication is effective, respectful and considers the patient's individual health literacy</li> <li>• Patients share in decision making about their care and are supported to be engaged in planning their care</li> <li>• There is informed consent</li> </ul>	<ul style="list-style-type: none"> <li>• Do your policies and processes set clear expectations for effective communication and shared decision making with patients, their families and carers?</li> <li>• Do your policies and processes aim to reduce the health literacy demands of information materials, the physical environment and local care pathways?</li> <li>• Does your workforce have access to health literacy and communication training, including communicating risk?</li> </ul>
<p><b>Goals of care guide clinical decisions and the patient journey</b></p>	<ul style="list-style-type: none"> <li>• Patients are asked 'what matters to them' when planning care</li> <li>• Goals of care are documented and are front and centre in all team considerations about care delivery</li> <li>• Patients are supported in advance care planning</li> </ul>	<ul style="list-style-type: none"> <li>• How are the patient's goals of care documented?</li> <li>• How do you ensure that the patient's goals of care are communicated to the patient, carer, clinical team and external partners following discharge?</li> <li>• Do you have a policy and process to support patients in advance care planning?</li> </ul>
<p><b>Diversity and equity are respected and supported</b></p>	<ul style="list-style-type: none"> <li>• Strategies are in place to support the different needs and cultures of the people who use the service</li> <li>• Interpreters are available</li> <li>• Executive and workforce members have a strong commitment to equity and aim to provide the same high standard of care to all patients</li> <li>• The workforce has adequate training and resources to provide culturally safe care and address barriers in access to care</li> </ul>	<ul style="list-style-type: none"> <li>• What is the diversity of the patient population using your service?</li> <li>• What strategies do you have to support the different needs and culture of your patient population?</li> <li>• If your patients have limited English, do you have interpreter or translation services available?</li> <li>• How are members of the workforce supported to develop cultural competence? Do they have access to appropriate training?</li> </ul>
<p><b>Transparency is a core element of safe, high-quality care</b></p>	<ul style="list-style-type: none"> <li>• The workforce and management are transparent and honest with patients about their care, even when things go wrong</li> <li>• Patients fully understand the options that are available to them and how their care is being delivered</li> <li>• Patient complaints and compliments are responded to in a timely manner</li> </ul>	<ul style="list-style-type: none"> <li>• Do you have an open disclosure policy? Are patients, families and the workforce aware and supported to use this policy?</li> <li>• How does your organisation respond to complaints or compliments? Are they communicated back to the workforce and used to inform process improvements?</li> </ul>



## Excelling in this attribute will help you meet some of the requirements in the National Safety and Quality Health Service (NSQHS) Standards (second edition)

Some of the main NSQHS Standard actions that relate to this attribute include:



### Clinical Governance Standard

- Incident management and open disclosure (1.11, 1.12)
- Feedback and complaints management (1.13, 1.14)
- Diversity and high-risk groups (1.15)
- Healthcare records (1.16)
- Evidence-based care (1.27)
- Safe environment (1.29, 1.30, 1.31, 1.32, 1.33)



### Partnering with Consumers Standard

- Healthcare rights and informed consent (2.3, 2.4, 2.5)
- Sharing decisions and planning care (2.6, 2.7)
- Health literacy: communication supports effective partnerships (2.8, 2.9, 2.10)



### Comprehensive Care Standard (all actions)



### Communicating for Safety Standard

- Effective communication with patients, families and carers (6.3, 6.8, 6.9, 6.10)
- Documentation of information (6.11)

## Helpful resources

**Shared decision making resources** including short videos, an online education module on risk communication and decision support tools:

[www.safetyandquality.gov.au/our-work/shared-decision-making](http://www.safetyandquality.gov.au/our-work/shared-decision-making)  
[www.safetyandquality.gov.au/communicatingrisk](http://www.safetyandquality.gov.au/communicatingrisk)

**Health literacy – National Statement and resources** including infographics and factsheets to help you improve your health literacy environment

[www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/health-literacy](http://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/health-literacy)

**Communication and Health Literacy Workplace Toolkit** provides practical tools to help you improve health literacy, making it easier for people to access, understand, appraise and use health information and services.

[www.dhhs.tas.gov.au/publichealth/about\\_us/health\\_literacy/health\\_literacy\\_toolkit](http://www.dhhs.tas.gov.au/publichealth/about_us/health_literacy/health_literacy_toolkit)

**Patient-clinician communication at transitions of care** resources

[www.safetyandquality.gov.au/our-work/clinical-communications/patient-clinician-communication](http://www.safetyandquality.gov.au/our-work/clinical-communications/patient-clinician-communication)

**Open Disclosure resources** including the Australian Open Disclosure Framework and resources for consumers, health care providers and health service managers

[www.safetyandquality.gov.au/our-work/open-disclosure/the-open-disclosure-framework](http://www.safetyandquality.gov.au/our-work/open-disclosure/the-open-disclosure-framework)

**Centre for Culture, Ethnicity and Health** provides a range of resources including resources on cultural competence, health literacy, language services

[www.ceh.org.au](http://www.ceh.org.au)



## References

1. Australian Commission on Safety and Quality in Health Care. National Safety and Quality Health Service Standards (second edition). Sydney; ACSQHC, 2017.
2. Doyle C, Lennox L and Bell D. A systematic review of evidence on the links between patient experience and clinical safety and effectiveness. *BMJ Open*. 2013; 3(1).
3. Olsson LE, Jakobsson UE, Swedberg K and Ekman I. Efficacy of person-centred care as an intervention in controlled trials – a systematic review. *J Clin Nurs*. 2013; 22(3-4): 456-65.
4. McMillan SS, Kendall E, Sav A, King MA, Whitty JA, Kelly F, et al. Patient-centered approaches to health care: a systematic review of randomized controlled trials. *Med Care Res Rev*. 2013; 70(6): 567-96.

