

# Person-centered care

MHCDS Grand Rounds

Joakim Edvinsson Class of '14.



# Agenda

- Short overview: Swedish health care system
- What is person-centered care and why now?
- Esther: a person-centered approach on a system level
- Self dialysis: a person-centered approach in the microsystem
- Q and A



# Welcome to Sweden!





# Welcome to Swedish health care!

Everyone (almost) has equal access to health care services

Responsibility for health and medical care is shared by the central government, county councils, regions and municipalities

The 20 County councils and regions are responsible for providing health care and general practices; responsible for organizing health care to citizens, hospitals, and primary care

290 municipalities are responsible for elderly care, care of the disabled, social services, nursing homes, home care





# What is Personcentered care and why now?

"Person centered care is all about seeing the person in front of you." The person's story is the starting point for:

- a partnership
- the mutual planning of care
- respect for each other's knowledge.



## Research in Sweden shows promising results



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Person-centered care — Ready for prime time

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# Person - Patient

#### Person

- Who
- Abilities
- Strengths
- Curious
- · Aware of your vulnerability

"Homo Capax"

#### Patient

- What/role
- Need
- Weaknesses
- Passive
- Protected from your vulnerability



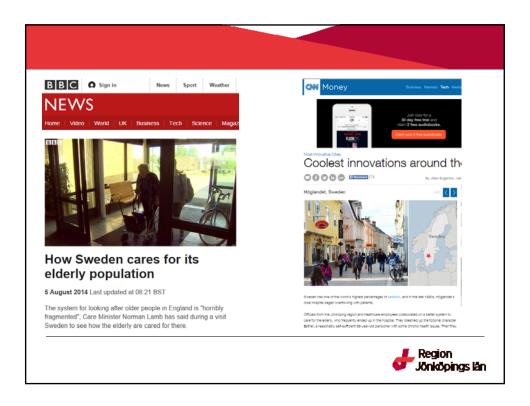
#### THE ESTHER NETWORK



The Esther Network is made of caregivers, clinicians, patients, and families who work to promote and improve the complex care in Region Jönköping county. "Esther" is a symbolic person, with complex care needs who requires the coordination and integration between hospital, primary care, home care, and community care. Esther is at the center of all our daily work.

(www.rjlse/esther)





The Esther Network includes health care workers and other caregivers committed to assessing their services "through patients' eyes". It started as a project in 1997, and was restructured into a network in 1999.

Today the network covers a population of 110,000 inhabitants.



#### **Our Vision**

 To create a durable and vigorous network in which Esther can feel confident and live an independent life. Esther should know who to ask for help. Esther will receive care in or close to her home. She will see us as a seamless network of care providers She has the right to an equal care all over Höglandet, Region Jönköping.

#### **Our Work**

 We work with continuous quality improvement and using coaching as a method to increase competence in the care pathway. We work to reduce the time Esther spends on seeking care.



#### **Our Organization**

- There are many meetings across the Esther Network.
  Esther's organizing committee are directors from hospital, primary care, social care and department of medicine.
- In every municipality there are smaller networks where Esther coaches have been trained to empower staff to always have Esther in mind. They create and lead projects aiming to improve her journey through the health system.

Nicoline Wackerberg, Physiotherapist Dedicated Program director for Esther network





#### Esther coaches - a key to success

• There are about 150 Esther coaches in the health and social care system.



- They act as coaches and in their normal profession at the same time in their daily work
- To be an Esther coach your are promoted based on your passion for Esther and will for doing improvements
- There is an Esther coach education of eight days multiprofessional learning.



## A few examples of Improvement projects

- · Team based approach for persons with dementia
- · Call back after hospital visit
- · Welcome home Esther
- Mobile Geratric Team
- Senior central
- · Stroke rehabilitation



## Some results

- Hospital admissions fell from approximately 9,300 in 1998 to an estimated 7,300 in 2003.
- Hospital days for heart failure patients decreased from approximately 3,500 in 1998 to 2,500 in 2000.
- Waiting times for referral appointments with neurologists decreased from 85 days in 2000 to 14 days in 2003.
- Waiting times for referral appointments with gastroenterologists fell from 48 days in 2000 to 14 days in 2003.
- The number of unnecessary days in hospital decreased from 1113 in 1999 to 62 in 2011.



# Self dialysis – Person-centered care in the microsystem





It started with a nurse and a patient

Christian Farman was diagnosed with renal failure at age 25.

An athletic man in good shape,

he recalls, When he started treatments,

He experienced side effects such as nausea, edema, and thirst. "It was horrific," he remembers.



"You have to help me treat myself. I need to have control in my life."

The story could have ended here. . .



An ordinary nurse would have answered. . .

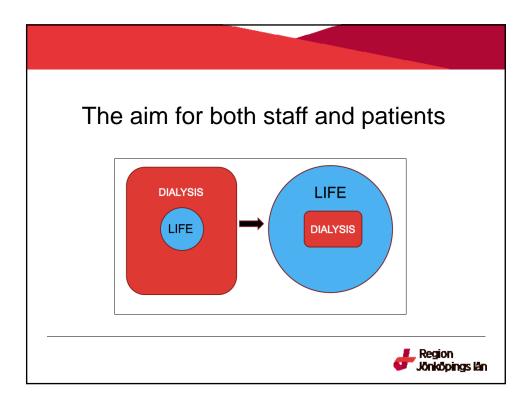
"NO, you can't do that. It's my job, it's too dangerous, it's my responsibility, you don't have the skills, The doctor would not allow it, maybe some other time. . .

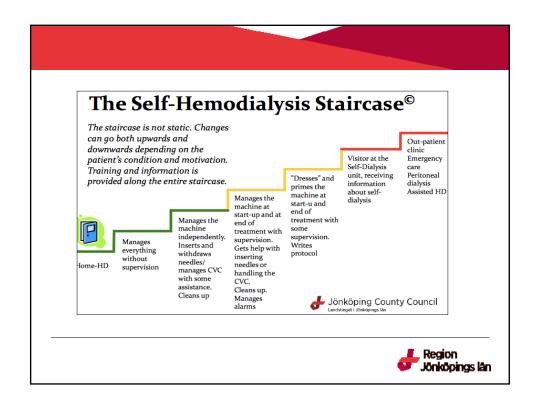
But he was fortunate - because he had met the. . .













# References

- <a href="https://www.youtube.com/watch?v=neSv7TdsLgk">https://www.youtube.com/watch?v=neSv7TdsLgk</a>
- https://www.youtube.com/watch?v=WBJ3jmh3L6I&index=1 &list=PL2MuksuD-vVTtOwcHDbvfypQFPzZbFeqU
- www.rjl.se/esther

