



Complete Summary

GUIDELINE TITLE

Client centred care.

BIBLIOGRAPHIC SOURCE(S)

Registered Nurses Association of Ontario (RNAO). Client centred care. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Jul. 70 p. [63 references]

COMPLETE SUMMARY CONTENT

SCOPE
METHODOLOGY - including Rating Scheme and Cost Analysis
RECOMMENDATIONS
EVIDENCE SUPPORTING THE RECOMMENDATIONS
BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS
QUALIFYING STATEMENTS
IMPLEMENTATION OF THE GUIDELINE
INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT
CATEGORIES
IDENTIFYING INFORMATION AND AVAILABILITY

SCOPE

DISEASE/CONDITION(S)

Not applicable

GUIDELINE CATEGORY

Management

CLINICAL SPECIALTY

Family Practice
Nursing
Psychology

INTENDED USERS

Nurses

GUIDELINE OBJECTIVE(S)

To present best nursing practice guidelines for client centred care

TARGET POPULATION

Clients in all health sectors

Note: The term client is inclusive of individuals, families/significant others, groups, communities, and populations.

INTERVENTIONS AND PRACTICES CONSIDERED

1. Embracing nursing core values and beliefs (i.e., respect; human dignity; clients are experts for their own lives; clients as leaders; clients' goals coordinate care of the health care team; continuity and consistency of care and caregiver; timeliness; responsiveness and universal access to care)
2. Practicing the core process of client centred care (i.e., identifying concerns/needs; making decisions; caring and service; evaluating outcomes)
3. Education, organization and policy approaches and strategies

MAJOR OUTCOMES CONSIDERED

Client centred outcomes, including client empowerment, client satisfaction, quality of care and quality of work life

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Hand-searches of Published Literature (Primary Sources)
Searches of Electronic Databases

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

A systematic literature search was conducted; Key videos depicting client centred care principles were viewed: "Through the Patient's Eyes" (1994, 1998), "Not My Home" (1994), "Real Stories" (1995), "Finding the Way" (1996). In addition, the panel examined the values and beliefs that are the underpinning of client centered care as reflected in the Code of Ethics of both the College of Nurses of Ontario (1999) and the Canadian Nurses Association (1997). An extensive literature review was conducted comprised of research, theoretical papers, and articles concerning clinical practice and client experiences. Evidence to support the values and beliefs was identified and specific actions pertaining to nursing were gathered.

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Expert Consensus

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Systematic Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not applicable

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Expert Consensus

DESCRIPTION OF METHODS USED TO FORMULATE THE RECOMMENDATIONS

In May 2000, a panel of nurses with expertise from practice, research, and academic sectors in the area of client centred care was convened under the auspices of the Registered Nurses Association of Ontario (RNAO).

The values and beliefs that are the underpinning of client centered care were articulated by the panel. Evidence to support the values and beliefs were identified and specific actions pertaining to nursing were gathered. Action statements for each value and belief statement were developed. Through a process of discussion and consensus, practice, education, and organization policy recommendations were developed.

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

Clinical Validation-Pilot Testing
External Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

A draft guideline was submitted to external stakeholders for review and feedback. The feedback received was reviewed and incorporated into the draft guideline;

The nursing best practice guideline was pilot implemented in selected practice settings in Ontario (see "Acknowledgement" in the original guideline document for a listing of implementation sites).

Pilot implementation practice settings were identified through a "request for proposal" process conducted by the Registered Nurses Association of Ontario (RNAO).

The guideline document was further refined taking into consideration the pilot site feedback, evaluation results and current scholarship identified through a supplementary literature review.

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

Practice Recommendation

Recommendation 1

Nurses embrace as foundational to client centred care the following values and beliefs: respect; human dignity; clients are experts for their own lives; clients as leaders; clients' goals coordinate care of the health care team; continuity and consistency of care and caregiver; timeliness; responsiveness and universal access to care. These values and beliefs must be incorporated into, and demonstrated throughout, every aspect of client care and services.

Education Recommendations

Recommendation 2

Education regarding the nursing best practice guideline for Client Centred Care should, wherever possible, be based on voluntary attendance by the nurse with organizations financially supporting this training.

Recommendation 3

The principles of client centred care should be included in the basic education of nurses in their core curriculum, be available as continuing education, be provided in orientation programs and be made available through professional development opportunities in the organization.

Organization and Policy Recommendations

Recommendation 4

To foster client centred care consistently throughout an organization, health care services must be organized and administered in ways that ensure that all caregivers, regardless of their personal attributes, enact this practice successfully. This includes opportunities to gain the necessary knowledge and skills to really

engage with clients from their standpoint, as well as organizational models of care delivery that allow nurses and clients to develop continuous, uninterrupted, and meaningful relationships.

Recommendation 5

Nursing best practice guidelines can be successfully implemented only where there are adequate planning, resources, organizational and administrative support, as well as appropriate facilitation.

Organizations may wish to develop a plan for implementation that includes:

- An assessment of organizational readiness and barriers to education
- Involvement of all members (whether in a direct or indirect supportive function) who will contribute to the implementation process
- Ongoing opportunities for discussion and education to reinforce the importance of best practices
- Opportunities for reflection on personal and organizational experience in implementing guidelines

In this regard, the Registered Nurses Association of Ontario (RNAO) (through a panel of nurses, researchers and administrators) has developed the Toolkit: Implementation of Clinical Practice Guidelines, based on available evidence, theoretical perspectives and consensus. The Toolkit is recommended for guiding the implementation of the RNAO nursing best practice guideline on "Client Centred Care."

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

Recommendations were based on the evaluation of evidence from a systematic review, other quantitative studies, nursing theories, qualitative sources and client reports of their experiences. Expert consensus was utilized when scientifically formalized knowledge was not available.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

- Guideline implementation is intended to help nurses provide client centred care.
- Client centred care is intended to help empower clients, improve client satisfaction, and enhance quality of care and quality of work life.
- Nurses, other health care professionals and administrators who are leading and facilitating practice changes will find this document valuable for the

development of policies, procedures, protocols, educational programs, assessment and documentation tools, etc.

POTENTIAL HARMS

Not stated

QUALIFYING STATEMENTS

QUALIFYING STATEMENTS

These best practice guidelines are related only to nursing practice and not intended to take into account fiscal efficiencies. These guidelines are not binding for nurses and their use should be flexible to accommodate client/family wishes and local circumstances. They neither constitute a liability or discharge from liability. While every effort has been made to ensure the accuracy of the contents at the time of publication, neither the authors nor Registered Nurses Association of Ontario (RNAO) give any guarantee as to the accuracy of the information contained in them nor accept any liability, with respect to loss, damage, injury or expense arising from any such errors or omission in the contents of this work. Any reference throughout the document to specific pharmaceutical products as examples does not imply endorsement of any of these products.

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

Toolkit:

Implementing Clinical Practice Guidelines

Nursing best practice guidelines can be successfully implemented only where there are adequate planning, resources, organizational and administrative support, as well as the appropriate facilitation. In this regard, Registered Nurses Association of Ontario (RNAO) (through a panel of nurses, researchers and administrators) has developed The Toolkit for Implementing Clinical Practice Guidelines, based on available evidence, theoretical perspectives and consensus. The Toolkit is recommended for guiding the implementation of any clinical practice guideline in a health care organization.

The "Toolkit" provides step by step directions to individuals and groups involved in planning, coordinating, and facilitating the guideline implementation. Specifically, the "Toolkit" addresses the following key steps:

1. Identifying a well-developed, evidence-based clinical practice guideline
2. Identification, assessment and engagement of stakeholders
3. Assessment of environmental readiness for guideline implementation
4. Identifying and planning evidence-based implementation strategies
5. Planning and implementing evaluation
6. Identifying and securing required resources for implementation

Implementing guidelines in practice that result in successful practice changes and positive clinical impact is a complex undertaking. The "Toolkit" is one key resource for managing this process.

For specific recommendations regarding implementation of this guideline, refer to the "Major Recommendations" field.

Evaluation and Monitoring

Organizations implementing the recommendations in this nursing best practice guideline are advised to consider how the implementation and its impact will be monitored and evaluated. A table in the original guideline document, based on framework outlined in the RNAO Toolkit: Implementation of clinical practice guidelines (2002), illustrates some indicators for monitoring and evaluation.

Educational Program

An educational program consisting of 16 classroom hours is outlined in the original guideline document.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

- End of Life Care
- Getting Better
- Living with Illness
- Staying Healthy

IOM DOMAIN

- Effectiveness
- Patient-centeredness

IDENTIFYING INFORMATION AND AVAILABILITY

BIBLIOGRAPHIC SOURCE(S)

Registered Nurses Association of Ontario (RNAO). Client centred care. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Jul. 70 p. [63 references]

ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

2002 Jul

GUIDELINE DEVELOPER(S)

Registered Nurses Association of Ontario - Professional Association

SOURCE(S) OF FUNDING

Funding was provided by the Ontario Ministry of Health and Long Term Care.

GUIDELINE COMMITTEE

Not stated

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

Guideline Development Panel Members

Penny Nelligan, RN, MSN
Team Leader
Director, Huron County Health Unit
Clinton, Ontario

Jackie Balfour, RN
Case Manager
Community Care Access Centre Niagara
Member, Ontario Nurses Association
Niagara on the Lake, Ontario

Lisa Connolly, RN(EC), BScN
Primary Health Care Nurse Practitioner
Kitchener Downtown Community Health Centre
Kitchener, Ontario

Doris Grinspun, RN, MSN, PhD(cand.)
Executive Director
Registered Nurses Association of Ontario
Toronto, Ontario

Christine Jonas-Simpson, RN, PhD
Director, Nursing Research
Sunnybrook & Women's College Health Sciences Centre
Sunnybrook Campus
Toronto, Ontario

Nancy Lefebvre, RN, MScN
Vice President, Knowledge and Practice
Saint Elizabeth Health Care
Markham, Ontario

Elizabeth Peter, RN, PhD
Assistant Professor
Faculty of Nursing, University of Toronto
Toronto, Ontario

Beryl Pilkington, RN, PhD
Assistant Professor
Atkinson Faculty of Liberal and Professional Studies
School of Nursing, York University
Toronto, Ontario

Cheryl Reid-Haughian, RN
Clinical Practice Consultant
ParaMed Home Health Care
Carleton Place, Ontario

Karen Sherry, RN, BScN, CPMHN(c)
GRASP Coordinator/Clinical Coordinator
North Bay Psychiatric Hospital
North Bay, Ontario

FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

The Registered Nurses Association of Ontario (RNAO) received funding from the Ministry of Health and Long-Term Care (MOHLTC). This guideline was developed by a panel of nurses and researchers convened by the RNAO and conducting its work independent of any bias or influence from the MOHLTC.

GUIDELINE STATUS

This is the current release of the guideline.

GUIDELINE AVAILABILITY

Electronic copies: Available in Portable Document Format (PDF) from the [Registered Nurses Association of Ontario \(RNAO\) Web site](#).

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

AVAILABILITY OF COMPANION DOCUMENTS

The following is available:

- Toolkit: implementation of clinical practice guidelines. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Jan. 91 p.

Electronic copies: Available in Portable Document Format (PDF) from the [RNAO Web site](#)

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

PATIENT RESOURCES

The following is available:

- Health information fact sheet. Putting patients first. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2003 Nov. 2 p.

Electronic copies: Available in Portable Document Format (PDF) from the [Registered Nurses Association of Ontario \(RNAO\) Web site](#).

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

Please note: This patient information is intended to provide health professionals with information to share with their patients to help them better understand their health and their diagnosed disorders. By providing access to this patient information, it is not the intention of NGC to provide specific medical advice for particular patients. Rather we urge patients and their representatives to review this material and then to consult with a licensed health professional for evaluation of treatment options suitable for them as well as for diagnosis and answers to their personal medical questions. This patient information has been derived and prepared from a guideline for health care professionals included on NGC by the authors or publishers of that original guideline. The patient information is not reviewed by NGC to establish whether or not it accurately reflects the original guideline's content.

NGC STATUS

This NGC summary was completed by ECRI on December 17, 2003. The information was verified by the guideline developer on January 16, 2004.

COPYRIGHT STATEMENT

With the exception of those portions of this document for which a specific prohibition or limitation against copying appears, the balance of this document may be produced, reproduced, and published in its entirety only, in any form, including in electronic form, for educational or non-commercial purposes, without requiring the consent or permission of the Registered Nurses Association of Ontario, provided that an appropriate credit or citation appears in the copied work as follows:

Registered Nurses Association of Ontario (2002). Client centred care. Toronto, Canada: Registered Nurses Association of Ontario.

Date Modified: 11/8/2004

FIRSTGOV

