

Editorial

Professionalism and patient-centred care

The Francis Report [1], published in February this year, is the last in a series of reports and inquiries into the failings of a UK health care provider, the Mid Staffordshire National Health Service (NHS) Foundation Trust. This report provided a detailed account of the appalling care and terrible suffering experienced by hundreds of people at the Mid Staffordshire Trust between January 2005 and March 2009. Francis gave a detailed analysis of the systemic failures that allowed wholesale patient neglect to take place. The report paints a bleak picture of care in the NHS, where patients were left in excrement in soiled bed clothes for lengthy periods; patients who could not eat without help were not provided with assistance; water was left out of reach of patients; in spite of persistent requests for help, patients were not assisted in their toileting; wards and toilet facilities were left in a filthy condition; privacy and dignity, even in death, were denied. The list goes on. The Francis report describes an environment where corporate self-interest and cost controls were prioritised over patient care, where there was a complete lack of leadership at all levels of the organisation, where poor care and chronic under-staffing were tolerated. Those staff that did speak out were ignored and others were bullied into remaining silent. There are various estimates of the number of patients who died as a result neglect and poor care, and while the exact figure will never be known, there is no doubt that the appalling care received contributed to the deaths of many hundreds of people. The Francis report makes some 290 recommendations that will have wide implications for all of those in health care, wherever they work.

The Francis report emphasised that the patient should be central to all that we do, that fundamental standards of care should be developed and made available for all professionals, patients and the public –

breaches of these standards should not be tolerated. Francis stated that openness, transparency and candour throughout the system about matters of concern should be ensured. The Francis report also recommended that all those who provide care for patients are properly accountable for what they do and to ensure that the public is protected by ensuring that only those who are registered are able to provide direct patient care.

The Francis report and its recommendations have caused much debate, discussion and reflection on what is professionalism in physiotherapy practice. At one level, defining professionalism is fairly straightforward. A discussion with first year physiotherapy students will elicit concepts of professionalism linked to behaviour, core values, ethics, public service, personal characteristics and distinct professional skills, which are all certainly components of professionalism. However, professionalism, I would argue, also encompasses much more complex elements such as situational awareness and contextual judgement, accountability to society, cultural awareness and perhaps most importantly, patient centeredness.

Patient centeredness or patient-centred care is a multidimensional concept that can be defined as:

Health care that establishes a partnership among practitioners, patients, and their families (when appropriate) to ensure that decisions respect patients' wants, needs, and preferences and that patients have the education and support they need to make decisions and participate in their own care [2].

Patient-centred care means treating the patient as a unique individual and demonstrating respect for the patient as a person [3]. Patient centredness encompasses the qualities of compassion, empathy, and responsiveness to the needs, values, and expressed

preferences of the individual patient [4]. The concept of patient-centredness also relates to the therapeutic relationship. A patient-centred therapeutic encounter will be characterised by responsiveness to the patient needs and preferences, and be based on shared decision making and patient empowerment [3].

Patient-centred care also encompasses the culture, environment, organisation and system of health care delivery. In a patient-centred model of care the organisation of health care would be such that truly personalised and individualised health care could be delivered to the patient. The organisation would listen to and be responsive to patients, their relatives and staff [3], the polar opposite of the system that prevailed in Mid Staffordshire. Thankfully, the picture painted by the Francis report is not a health care system that I recognise, nor could I imagine physiotherapy colleagues tolerating, even for a moment, the appalling care described. However, bullying managerialism, increasing demands on too few staff, low morale and job insecurity is something that many who work

in today's health care have experienced. Hopefully the Francis report will go some way to ensuring that all aspects of unprofessional behaviour in health care are never tolerated.

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