Personcentrerad vård
i särskilda boenden för äldre

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Akademisk avhandling

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Abstract

Introduction: Older people with health issues such as cognitive impairment or dementia often become dependent upon residential aged care to feel safe, experience well being and a good life with others. Person-centred care is a contemporary best practice model of care that can meet the multidimensional needs and preferences of older people dependent on care.

Aim: The overall aim of this thesis was to describe factors that associate with person-centred care in Swedish residential aged care units.

Methods: The thesis consists of four studies with cross-sectional designs, and data was collected through resident and staff surveys in Swedish residential aged care units. Study I collected data consisting of ratings of person-centred care from staff (n=1465) in 182 residential aged care units. Study II collected data consisting of staff (n=1169) ratings of person-centred care and proxy ratings of resident (n=1261) quality of life, ADL-capacity, pain, depressive symptoms and agitated behaviours, in 151 residential aged care units. Study III was based on staff (n=1169) ratings of person-centred care, satisfaction with care and work, job strain, stress of conscience, and perceived psychosocial climate in the same 151 residential aged care units as in study II. Study IV was also based on data from the 151 residential aged care units as described in study II and III, and included ratings of resident and staff variables, as well as variables related to the organization and environment at the units.

Results: Study I showed that the Person-Centred Care Assessment Tool (P-CAT) has satisfactory psychometric properties relating to internal consistency, test-retest reliability and construct validity. Study II showed that residents were rated as having higher quality of life and better ability to perform activities of daily living in units described as being more person-centred. Study III highlighted that person-centred care was associated with higher staff satisfaction, less job strain, less stress of conscience, and a positive psychosocial unit climate. Person-centredness of care was also positively associated with the extent to which staff had continuing education in dementia care. Study IV showed that the environment is the most influential factor for person-centred care, and that an environment facilitating person-centred care consists of a positive psychosocial unit climate, where staff perceives having time to spend being with residents, where staff perceives a shared philosophy of care, a low job strain, and a physical environment adapted to residents' needs.

Conclusions: The results of the thesis show that the Swedish version of the P-CAT can be used for valid and reliable assessment of unit person-centredness, and that it can be recommended for further research and practice development in residential aged care. The results of the thesis also show that the environment of care and work that encapsulates residents and staff in residential care units is important for person-centred care. These aspects need further focus to enable person-centred care in residential aged care units. Further research and practice development work is needed to operationalize and implement the components that contribute to a positive psychosocial climate and a person-centred philosophy in residential aged care units. A strive towards developing person-centredness further within aged care is desirable, as the results in this thesis indicate that residential aged care units described as more person-centred were positively related to wellbeing and satisfaction in residents and staff.

Keywords: care environment, cross sectional study, dementia, nursing staff, organization, person-centred care, residential facilities, well-being