

Person-Centred Care

# A TOOLKIT FOR PROVIDERS

7 principles

to adopt and embed Person-Centred Care

**Understanding and Meeting the Needs of Older Persons** 









#### **About**

Council on the Ageing (COTA) Queensland with Consortium partners, Skills Hubs, and Skills Generation were contracted by the Australian Government Department of Health and Aged Care to attract, train, and support the attraction and retention of Personal Care Workers (PCWs) across Queensland over 2 years, through the Home Care Workforce Support Program (HCWSP).

The HCWSP resulted in a significant number of learnings and opportunities for individuals and providers to understand, acknowledge, and implement Person Centred Care (PCC) ways of working. These toolkits are designed to assist in the adoption of PCC by individuals and providers. For some, it will be about changing the way a provider operates, and ultimately adopting an important component of the Royal Commission into Aged Care recommendations. The dedicated HCWSP website includes stories, case studies, the evaluation report, and much more. References to these reports are included in this toolkit including QR codes for quick access.

Two toolkits have been developed as part of the outcomes from the Program:

- 1. Provider Toolkit: How to enable and empower person-centred care in my workforce
- 2. Carer Toolkit: Key principles of person-centred care and self-reflection.

## Acknowledgements

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The recommendations in this toolkit are drawn directly from insights and feedback gathered from a range of stakeholders through engagement activities delivered by the Home Care Workforce Support Program. We acknowledge the valuable contributions from consumers, care partners, personal care workers, providers, volunteers, and other interested stakeholders who willingly and openly shared their own lived experiences, views, and perspectives for informing the development of this toolkit.









#### Introduction

Welcome to the "Provider Toolkit – How to enable and empower person-centred care in my workforce". This 'best practice' toolkit is designed to equip Aged Care Providers with the knowledge, skills, and resources necessary to empower their workforce to provide high-quality care to older individuals in their own homes. By understanding the unique needs and challenges faced by older persons, support workers can deliver compassionate and person-centred care that promotes health, dignity, and well being.

Most aged care providers understand the concept of person-centred care. Such care is usually practiced by care staff who have the older person at the centre of their concerns. However, the day-to-day demands of rosters and other job pressures can get in the way. This toolkit is designed as a phased step-by-step approach to implementing and embedding person-centred care in your organisation. If your organisation is only starting its journey on person-centred care, then we recommend using the steps sequentially to successfully implement a person-centred care approach to the care your personal care workers provide. However – if your organisation has already commenced, jump to the step in the continuum that is most relevant to your progress – it is not essential for the steps to be performed sequentially.

A key element in attracting and retaining the vital home care workforce is understanding what the work of a home carer is and the impact it can have on someone's life, both for the person undertaking the work and for the person receiving it, as well as their family. A person–centred approach is vital in providing high quality care and is essential to upholding the rights of people receiving care. These are key reasons why a person–centred approach is part of accreditation standards and requirements for quality care.

There are many benefits to adopting a person-centred approach:

- allows older people and their professional carers to have greater control over their own lives by allowing them to make choices about the types of care and services they access and how and when they are delivered
- support staff to value and seek to know the people they care for, to understand their experience and to support them to retain as much independence and dignity as possible
- · enables engaged staff to have greater job satisfaction, resulting in improved retention
- providers are well placed to provide culturally appropriate responses
- · enhances a providers reputation and standing
- · provides the foundation for delivering Consumer Directed Care.
- Step 1: Defining Person-Centred Care
- Step 2: Checklist to determine person-centred care readiness
- Step 3: Raising the profile of the PCW role
- Step 4: Attracting the right people
- Step 5: Streamlining processes and workplace practice
- Step 6: Provide training and development pathways
- Step 7: Develop a people-centred workforce strategy









### Step 1: Defining Person-Centred Care

#### Lets start by defining what person-centred care is.

The term 'person-centred care' is often used interchangeably with 'consumer-centred care' and 'patient-centred care' (Australian Commission on Safety and Quality in Health Care [ACSQHC], 2010, 2024). According to the ACSQHC (2024), "It is care that respects and responds to the preferences, needs, and values of patients and consumers, to ensure they are treated respectfully, as an individual human being, rather than a condition to be treated".

Importantly, person-centred care is essential to uphold the rights of people receiving care, to be involved in all decisions that impact them, to have their wishes and needs respected, and to be informed and heard. These are key reasons why a person-centred approach is part of accreditation standards and requirements for quality care.

For the purposes of this toolkit, we are talking about the same thing.

Person-centred care is defined as care that is respectful and responsive to the individual and cultural needs of the consumer, valuing and respecting their preferences, rights, values, and decisions.

The fundamental principles guiding person-centred care are dignity, respect, autonomy, and choice for the individual.

Person-centred care is embedded throughout all the ACSQHC Standards, including the National Safety and Quality Health Service Standards (NSQHS, 2024a) and the National Safety and Quality Primary and Community Healthcare Standards (2024b), reflecting its importance to the safety and quality of health care. It is also embedded in the 'Code of Conduct' (known as 'the Code'), which was introduced on 1 December 2022 to improve the safety, health, wellbeing, and quality of life of older Australians receiving aged care (ACQSC, n.d.). All providers of aged care services have a responsibility to treat every older person with dignity and respect and to recognise and value their identity, culture, and diversity.

From a care worker's perspective, PCC is about recognising that every person is different with different needs, goals, and values. These needs may change from day-to-day, and care needs to be responsive to these changes. PCC acknowledges that people are experts in their own lives. Care should focus on their abilities and strengths to uphold their human rights and dignity, adopting a preventative and reablement approach to care, rather than focusing on their deficits and doing things for them. PCC is about prioritising the goals, values, and needs of the older person.









# Step 2: Checklist to determine person-centred care readiness

### How ready is your organisation and what may be preventing adoption

In using this toolkit – the 2nd step in enabling person–centred care in your organisation is to work through the following checklist to determine readiness. The checklist is based on the readiness of the organisation and the PCW – understanding of person–centred care, how your PCW's do or don't do the following, and whether your policies and procedures are preventing some of the actions.

Provider processes that enable (or prevent) person-centred care being enacted	We do this	We don't this	We could do this
Have in place policies and procedures that support and empower the PCW to enact person-centred care. For example, guidelines on how to communicate with clients, processes on how to identify, action, and resolve areas of concern, individual PCW learning, and development plans.			
In your Governance acknowledge that person-centredness is not just for the direct care workforce, but for a whole of organisation focus that encompasses rules and guidelines, rostering, communications, quality, and compliance.			
Audit and review Governance (policies and appraisals) on how they support PCC.			
Have strategies for engaging with local coordinated interagencies that work to support people from diverse groups and backgrounds.			
Have strategies for providing 'out-of-hours' care (evenings and weekends) to meet the diverse needs of the population and provide respite to care team partners (eg family members).			
Provide 'consistency of care' and acknowledge the value of sending the same worker every week, particularly for people living with dementia.			
Allocate time to the PCW to understand the older person's needs, at the start and ongoing throughout the program of care.			
Have a workforce awareness and understanding of people's diverse identities, backgrounds, and inter-sectionalities (e.g., culture, sexual identity, disability, socioeconomic background, health conditions).			









# Step 2 continued:

Checklist to determine person-centred care readiness

## How ready is your organisation and what may be preventing adoption

Skills that your person-centred care workforce have	We do this	We don't this	We could do this
Understand the role of the family and other informal carers, and capture this information ongoing.			
Understand person-centred care is a "whole of care delivery" mindset – it is not a case of finish the scheduled tasks (showering, vacuuming, health check) and then put on your person-centred care hat on.			
Provide the time and space where people can develop trust and to process, to think and to respond in the way that works for them.			
Acknowledge it's not a one size fits all approach, not making assumptions about the person's care.			
Understand people want to be seen and heard and in control of their lives and homes.			
Negotiate people's wants against their needs and service entitlements (professional boundaries).			
Provide the PCW with the skills, authority, and responsibility to enact on person-centred care principles.			
Allocate time to the PCW for critical reflection, peer learning, training, and upskilling.			
Provide opportunities for PWCs to work through case studies to practice problem-solving and reinforce PCC.			
Provide internal support mechanisms for the PCW to ensure they are experiencing a healthy and supportive workplace and work environment.			









Step 3: Raising the profile of the PCW role

#### Valuing the role of the PCW and enabling their work

To deliver person-centred care, the person providing the services needs to have their services valued – highly. PCWs are motivated by the desire to help people and to have work that is meaningful and valued. They find job satisfaction in helping older people. In turn, they need to be valued and supported by their colleagues and supervisors – they need to feel valued. Importantly, PCC requires workers to develop meaningful relationships with older people and those who support them. They need to understand the person's needs, goals, and values. They need to respect their rights and protect their dignity. At the same time, they need to maintain professional boundaries and operate within the constraints of the practicalities of service provision.

Raising the profile of the crucial importance of the PCW – is fundamental to attracting the best PCW to your organisation, and providing person–centred care to your clients. Providing support for your PCW, rather than disabling and restrictive processes, will help empower the person–centred care skills inherent within your personal care workforce. This enabling support needs to be organisation–wide – including the mission, values and culture, Governance process, how the Operations Department supports decision–making, how the Finance Department ensures clients and workers are not burdened with financial matters, how the Rostering Department schedules workers with efficient travel arrangements and buddy's when necessary. Flexibility and predictability in hours, and sufficient hours are also important matters. Workers highly value a fair and considerate rostering approach, which leads to improving a care worker's work–life balance, and as a by–product, an increased loyalty to the organisation. Ultimately the whole organisation is responsive (not reactive) to the needs of the care worker who in turn is responding to the needs of the older person and those who support them.

Remuneration is a crucial factor in PCW attraction and retention. Where possible this includes paying above industry awards, providing travel allowances, offering training and qualification reimbursements, and delivering retention and referral bonuses. This can extend beyond purely financial to include benefits such as gym memberships, company cars, RDOs, etc.

Recognition by the employer is valued by PCWs. A healthy team culture including recognising and celebrating success through work socials and team-building events is an important way to raise the profile of the PCW and the value of their work.

Support both visibly and emotionally is also an important method for raising the profile of the PCW, and the important and often challenging role they undertake. Mutual respect and trust between supervisors and care workers is vital for staff retention. Supervisors who integrate care workers' experiences into policies often gain increased emotional engagement and support. For example, gradual transitions into solo work helps boost confidence, while acknowledging that a lack of clarity in the role can lead to stress and challenges in client relationships due to misaligned expectations.









# Step 4: Attracting the right people

#### What criteria to consider when growing your workforce

While person-centred care can be taught – adopting the principles and acting on them is different. Recruiting a person with the right values becomes a fundamental success factor if person-centred care is to be delivered by a provider. As a provider, you want to attract and retain people who:

- · value care work
- · value making a positive difference as part of a skilled care team
- · want to provide high quality care that meets individual wants and needs
- · achieve a sense of fulfillment from being able to make a difference to people's lives
- like working in skilled teams where they're valued, where they're included in decision making, where there's good communication and support.

Further, because PCWs are seeking an employer whose values match their own, as a provider – having clear organisational values is a way to improve both the attraction and retention of staff. When organisations have strong core values, this tends to inform multiple touch points along the way in recruitment and employment. An organisation's values and reputation are central factors in attracting the right staff.

With these fundamentals in place, suggestions to find the right person include targeted recruitment plans to reach specific audiences such as parents returning to work, or better engaging graduates via school/university career days. This also includes targeting a diversity of backgrounds and lived experiences, suggesting the right people may come from different career backgrounds and related professions (e.g., police officer, military, nursing).

Because of the inherent Emotional Intelligence (otherwise known as emotional quotient or EQ) characteristics of person-centred care, interviewing for such criteria is challenging. Having a buddy mentoring approach to new workers is a proven method to determine the characteristics of the PCW. From a client's perspective, the EQ they see as necessary for a PCW include:

- The ability of common sense-this included people with maturity, life experiences, and emotional intelligence
- · knowledge of how to integrate their duties with a person-centred care lens
- · the ability to stay calm and positive in a crisis
- · being resourceful and resilient
- · willingness to step outside their comfort zone and challenge themselves
- · the ability to identify and process complex situations, make decisions, and then implement
- the ability to understand the interrelationship between the provider, PCW and the client, their families, and care partners
- noticing and raising concerns within the home and taking appropriate action

Ultimately the PCW needs to have a genuine commitment to the role and be passionate about making a difference in people's lives. Recipients of care describe personal attributes and relationship-focussed skills (also known as, 'soft skills', 'people skills' or 'interpersonal skills') as key characteristics for the PCW role. Examples given included: active listening, caring, confidence, communication skills, empathy, compassion, intelligence, friendliness, kind, honesty, respect, sense of humour, and trust, to name a few.









# Step 5: Streamlining processes and workplace practice

#### Support your PCW's so they can provide good support

Delivering person-centred care requires a supported workforce, recognising the value of supporting staff to maintain their wellbeing. If your PCWs are not supported, how can they provide good support?

PCWs have to navigate the challenges of their role with managing their wellbeing – this requires support from their employer, helping them be the best they can be to deliver person–centred care effectively.

Delivering person-centred care requires legal, ethical, and organisational frameworks in place, to protect clients and workers from physical and emotional harm. person-centred care is a balance between good care relationships and professional care boundaries. Educating the client on what is acceptable, helping them to understand their home is now a workplace, and to value what the workers do. For example, having a clean home means the client can have friends over.

This balance can fail if the organisation lacks clear frameworks and training to implement the frameworks. As an example, PCWs must be aware of the pathways available for addressing their concerns when seeing or hearing something that doesn't feel right, or reporting incidences of abuse and neglect, including reaching out to a trusted colleague or manager. Does your organisation provide this clear pathway within procedural manuals?

Delivering person-centred care requires an inclusive workforce and an inclusive workforce requires strategies to foster inclusion and diversity. This includes more targeted advertising within diverse communities to encourage people from CALD, Aboriginal and Torres Strait Islander (ATSI), Disability, LGBTIQA+, and Seniors groups to apply for PCW roles, as well as attracting men into these roles through advertising.

Other strategies include recognising that CALD workers face significant barriers in applying for roles, due to the requirement for police checks, birth certificates, and driver's licence. Overcoming these barriers, essentially removing these requirements – is a way of opening up these PCW roles to a diverse group. From the client's perspective, some care recipients feel their needs may not be met if they are unable to understand their support worker. Useful strategies for removing some of these barriers include supporting CALD workers to improve their English literacy and comprehension and having 'cultural champions in the workplace'. Training materials with photos and videos rather than text will also help learn about the 'real person', which may be particularly useful for CALD workers with low-level English literacy.

Evaluation and feedback are crucial for ensuring person-centred care is effective. It involves regularly reviewing the person's care and treatment, and seeking their feedback. These feedback loops need to be integrated into the day-to-day practice of the PCW and their supervisors. Continuous professional development also requires embedding into the work of the PCW. This will ensure regularly updating knowledge and skills to ensure the PCWs can provide the best possible care for the client.

Overall, recipients of care acknowledge the complex nature of navigating the PCW role, which involves being an ally in delivering person-centred care, meeting the needs of the organisation, and working within the boundaries of the role, while safeguarding themselves, their client, and the care relationship.









# Step 6: Provide training and development pathways

#### Why its important and what's on offer

So far in this toolkit, we have identified that the workplace must support the culture of person-centred care, so care professionals can deliver high-quality person-centred care. To do this PCWs must have access to appropriate training, learning and development pathways, and staff wellbeing initiatives. PCWs also need to have a willingness for continuous learning in the form of training, peer learning, and reflective practice.

For example, in addition to completing Certificates III and IV in Aged Care, additional enhanced training to engage and support staff better, includes training in areas like first aid and mental health, which benefit both the professional carer and their clients.

Recommended training, development, and learning pathways includes the following:

Knowledge Area	<b>Details</b>
LGBTIQA+ Community	<ul> <li>Awareness and education around people's identities and how PCWs can respect the communication preferences of diverse identities.</li> <li>Training for inclusive language to reduce unconscious bias, stigma, and discrimination.</li> </ul>
Chronic Health Conditions	<ul> <li>Access to resource libraries for providing complete support.</li> <li>Awareness and understanding of chronic health conditions (including arthritis, dementia, degenerative disease, diabetes, mental health, stroke, and terminal illness).</li> <li>Collaboration with community organisations, advocacy groups, and relevant networks to share information, expertise, and resources.</li> </ul>
Disability	<ul> <li>Disability awareness training incorporating knowledge and understanding in supporting the needs of people with disability.</li> <li>Effective communication for engaging people with disabilities.</li> <li>Training and familiarisation with assistive technologies.</li> </ul>
CALD Community	<ul> <li>Cultural awareness, competency, and safety training.</li> <li>Buddy system or two-buddy shift.</li> <li>Building trusted relationships with key partners when exploring issues that impact people from culturally diverse backgrounds and improve consumer access to available services and supports.</li> <li>Challenging cultural bias, conflict, and misunderstandings.</li> <li>Cultural Ambassadors to bridge the gap between client, PCW and provider.</li> <li>Pictorial manuals, documentations, and videos offering visual storytelling, culturally relevant images, and accessible formats.</li> <li>Support to improve English literacy and comprehension (e.g., community-based learning at the local library, Neighbourhood and Community Centres etc).</li> </ul>









#### **Knowledge Area**

# Safeguarding, wellbeing and trauma-informed care

#### **Details**

- Training on worker-client boundaries to ensure the safety and wellbeing of consumers.
- Clear guidelines, processes, and reporting procedures in place and PCWs have a good understanding of them.
- Encourage friendships amongst professional carers to foster a positive working environment.
- Good knowledge of referral processes (i.e., knowing when something is outside the boundaries of your role and needs support).
- Training on understanding ageism and how to challenge it
- Training on trauma-informed care and how historical trauma can impact a client's ability to accept appropriate, respectful, and safe care.
- · Training on how to read care plans.

#### Learning pathways

- Reflective practice, peer support, chats, and debriefs.
- Greater focus on 'relationship-based' care rather than transactional 'task-based' care.
- A person's home becomes a place of work, and the care recipient needs to understand this regarding safety, language, following directions, etc.
- Address ageism, stereotyping, discrimination, and racism in the workforce and developing strategies for challenging these situations in the living and working environment.
- Providing training opportunities including cultural competence training, resilience, and wellbeing training, and including completion as microcredentials towards the carer's career ambitions.









Step 7: Develop a people-centred workforce strategy

#### Reflection before embarking on a strategy to focus efforts

When considering your organisation's people-centred workforce strategy, creating an environment that doesn't just train people to provide care but enables and supports them as Care Professionals with purpose and impact requires an organisational-wide focus. This focus is all about employing the right people for these jobs with the right skills, the right knowledge, the right attitudes, and that they're supported by the right organisational environments.

Workforce strategy is often seen as being the scope of Human Resources professionals and executives. However, there is a huge pool of expertise in your organisation that you might not be tapping into. As a provider, you want to attract and retain people who match the profile of a person-centred care worker (as per section 4 above). To achieve this, providers need to construct workplace environments that support that way of working. This requires an understanding of what the experience of providing and receiving care looks and feels like – ie the voice of the client and the voice of the carer. At a minimum, those stakeholders include people using care services and their family or unpaid carers as well as existing staff. Therefore this is not just the Human Resources department of the provider.

The following questions will guide your organisation's journey when developing a people-centred workforce strategy:

- How much do you know about what attracts people to the sector and your organisation?
- · What keeps them there?
- · What gives people job satisfaction in their roles?
- Do we meet local and regional needs? Place-based solutions and innovation's are required to deliver person-centred care in rural, regional, and remote communities. This includes employing locals, where possible, to support locals' care needs.
- · Does the organisational culture support the culture of person-centred care?
- Is our organisation competitive when attracting new PCWs (pay, support, benefits, training)?
- Do we offer culturally appropriate care, and do we provide training to understand the nuances of gender and cultural barriers?
- Do we have a public commitment to addressing ageism, discrimination, and racism in the workplace?
- A focus on proactive retention strategies and highlighting the difference with reactive retention (i.e. EAP after critical incident). This would be valuable to highlight and provide strategy ideas for.







Issues that people face when working in aged care that cause them to leave, can be countered by a people-centred workforce strategy that looks like this:

workforce strategy that looks like this:	
Reason to Leave	People-centred workforce strategy (mitigation)
High workloads: not enough staff, without the right skills or who aren't suited to the work.	People-centred workforce rostering focus. Less about profit, and more about retaining the staff member and serving the client with consistent carers.
Time stress and not getting enough time with their clients.	Reduce the unsustainable workloads on individual staff members. Allow the time to know the person, they are more than just the client.
Poor communication: not having enough support, being left out of decision making.	Providing suitable modes of communication (e.g., feedback forums, regular leadership and mentoring sessions, team meetings).
Having difficulty meeting or managing the expectations of clients and their families.	Scheduled mentoring and peer learning to create a sense of camaraderie and ongoing learning and development.
Health and safety protocols not being followed.	Induction, mandatory training, and then performance monitoring including health and safety protocols.
Unclear delegation of responsibilities.	Induction and then performance monitoring includes clarity on decision-making and delegation of roles and responsibilities (eg if its important to the client, allow for a cup of tea and conversation).
PCWs feel their priorities and those of clients not matching those of management.	As above, this is about communication and transparency in decision–making and clear understanding of role and boundaries. Plus ensuring PCWs are fully supported to manage their wellbeing. Plus feeling recognised and appreciated while having peer–to–peer mentoring/support.
Mismatch between organisational processes for Recruitment and expectations of carer ready to work.	Clear role descriptions, greater flexibility, streamlining application processes, induction and ongoing training and development.
Are they given the value and the authority that matches the kind of care we're expecting them to give?	Provider priorities for recruitment and development reflect the views and needs of the people using your services not just as a fundamental principle.









Systems & Society
(Policies, reforms, external factors)

Institutions & Organisations (Providers & Stakeholders)

O Home & Community (Services & supports)

 People & Relationships (Consumers, care partners, PCWs)

Person (Consumer)









#### Person (Consumer)

Every consumer is different with a broad range of interests and care requirements. Different attitudes, beliefs, values, preferences, experiences, socioeconomic and cultural backgrounds, identities, vulnerabilities, and strengths. Consumers want to be involved; have their rights, needs, and decisions respected, and have a sense of purpose, belonging, and connectedness.

People &
Relationships
(Consumers, Care
Partners, PCWs)

The relationship between the consumer, family, care partners, and the PCW is complex. It needs to foster an inclusive environment of mutual respect and understanding; encourage open and respectful communication for people from diverse backgrounds; foster meaningful conversations, create intergenerational connections; work within professional boundaries, and understand and support the emotional impacts of ageing.

Home & Community (Services & Supports)

PCWs support consumers to stay living independently at home and help them navigate activities, supports, and services in their local communities. They share knowledge, information, and resources, raise the profile of their role and network, connect and collaborate within the community, and across the sector so that older people are supported to live fulfilling and meaningful lives as they age. They also have an opportunity to promote online safety and digital inclusion (including the use of Al).

Institutions & Organisations (Providers & Stakeholders)

Providers operate within policies, processes, procedures, and frameworks. They have an ethical and legal responsibility to safeguard the wellbeing of their workforce and consumers. Attracting, training, and retaining PCWs and delivering person-centred care requires a multifaceted approach. The interconnected components need to be addressed in a coordinated and integrated way. They need to involve consumers and the workforce in decision-making, care planning, and policy development.

Systems & Society (Policies, Reforms, External Factors)

The aged care landscape is influenced by a multitude of factors; including the ageing population and changing demographics; policies, standards, regulations, and reforms; workforce dynamics; systemic ageism, discrimination, and racism and external factors (e.g., political, technological advancements, sociological, legal and environmental).











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