

Hospital care can seem impersonal. One-page profiles can support person-centred care and improve communication and understanding between patients and nurses

# Using one-page profiles to personalise care

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One-page profiles are regularly used to communicate information about service users in social care; this simple, concise tool can also be used in healthcare settings. This article describes how one-page profiles can benefit both patients and nurses in hospital.

One-page profiles are a simple, concise way of communicating important information about individual patients or service users. They include what is important to them, what they like and how they want to be supported – on a single sheet of paper. They are written by the patients themselves, sometimes with the support of people who know them.

The profiles are based on concepts and practices developed by the Learning Community for Person-Centred Practices ([www.learningcommunity.us](http://www.learningcommunity.us)), and apply person-centred thinking, values and skills in a practical way.

Person-centred thinking and practices, such as one-page profiles, are based on discovering people's strengths and attributes, understanding what is truly important to them and then delivering support in a way that makes sense to them. They are rooted in evidenced-based person-centred planning (Robertson et al, 2005) and are the foundation of a personalised approach (Department of Health, 2010).

Profiles are used in hospices, hospitals,

schools and nurseries (Lace, 2012), day and residential care, health and social care teams and organisations, and even a large pharmaceutical organisation.

The Social Care Institute of Excellence (2013) encourages staff to complete their own profile and assist people they support to do their own. This enables staff to understand what a one-page profile is, and know how to support each other well in the workplace.

## Developing profiles for hospital patients

Spiral Health is the first social enterprise to take over a bed-based NHS unit; its managing director, Tracey Bush, is a nurse. As well as nursing, Ms Bush has experience in social care and was keen to introduce some of the practices she had encountered there into a hospital environment.

In the past year, I have worked with her to introduce a more patient-centred journey for patients in a 40-bed therapy

## 5 key points

**1** One-page profiles are a simple, concise way of communicating personal information about a patient

**2** They are written by patients, sometimes with the support of people who know them well

**3** The profiles outline what is important to patients so care can be tailored

**4** They are rooted in evidenced-based, person-centred planning

**5** One-page profiles are used in a variety of health, social care and education settings

## BOX 1. PERSONALISED CARE USING A PROFILE

Lead nurse Jan Moutrey interviewed patient James Green\* who told her that "the best way to support me is to speak up" as his hearing aid was not very effective, and "to be friendly because I'm sociable and enjoy company".

Jan noticed that he was reading the *Daily Mail* and Mr Green said he had read it every day for 42 years. Jan added that into his profile because she realised that to miss a day would upset Mr Green.

\* The patient's name has been changed

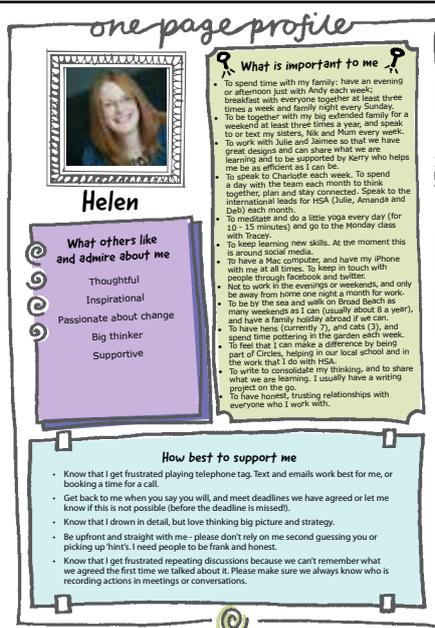
unit. Introducing a new approach into a well-established hospital environment with highly trained staff presented some challenges. Being person centred is something that most health professionals see as part of their role so there was a degree of resistance to formalising this with the use of specific person-centred thinking tools (DH, 2010).

Some patients are in the unit for only five days so it was unrealistic to develop a detailed document. The solution was to identify the most important information to capture in a one-page profile and ensure it was gathered in an efficient way, early in a patient's stay.

Nurses compile the profiles as part of the initial patient assessment and focus on gathering five or six bullet points about what is important to each patient, and what they want hospital staff to know or do to support them in hospital.

One way in which nurses find out what matters to each patient is to find out what good days and bad days look like. To help patients to open up, nurses use questions such as "what does a good day in hospital look like?" and "what would make it a bad day or what should we avoid?" Responses vary and offer a genuine insight into patients' worries and concerns as well as the small changes that can be made to significantly improve their happiness, well-being and recovery.

The one-page profiles are generally pinned onto the whiteboard above



One-page profiles are drawn up by both staff and patients

patients' beds, if patients agree to this. They do not include confidential information and patients can decide what they are happy to share with others.

### Staff profiles

Staff are encouraged to draw up their own one-page profiles. These usually list three things about them, such as hobbies and interests, and three things about their role.

They are posted in communal areas of the hospital where patients and staff can read them and learn more about each other.

### Benefits of the profiles

The patient profiles give nurses a deeper understanding of their patients, and it is often small things that have the greatest impact (Box 1).

At the time of writing, 70% of patients and the majority of staff have a one-page profile and the team is working towards this being 100% as more staff are trained to complete them.

The benefits of having staff and patient profiles are starting to ripple out, with staff learning more about the patients and each other and the patients learning more about nurses. Staff feedback shows that patients are seen more as a whole individual rather than a person with a particular medical condition.

Spiral Health's patient satisfaction survey questions an average of 24 patients per month and includes the question: "Were you treated as an individual during your stay?" Over a five-month period from July 2013, the response was 100% positive, compared with 91% before the profiles were introduced.

### One-page profiles in paediatrics

One-page profiles can be particularly useful for children in hospital. They serve as a helpful communication tool both for the child – who may be intimidated by hospital process – and for parents who may be too stressed and anxious to articulate their concerns in a way they would like to. The case study in Box 2 illustrates the benefits.

### Conclusion

One-page profiles are a simple tool that patients and nurses can use to personalise care. The aim is to improve communication and help staff to tailor care to meet patients' individual needs.

The concept of using a single page means profiles can be completed quickly and used in areas where patients have a short length of stay. **NT**

### References

- Department of Health (2010) *Personalisation Through Person-Centred Planning*. [tinyurl.com/person-centred-DH](http://tinyurl.com/person-centred-DH)
- Lace H (2012) Innovative practice: introducing one-page profiles to help pupils personalise their education. *Times Educational Supplement*. [tinyurl.com/one-page-profiles-TESS](http://tinyurl.com/one-page-profiles-TESS)
- Robertson J et al (2005) *The Impact of Person-Centred Planning*. Lancaster: Institute for Health Research, Lancaster University. [tinyurl.com/UniLanc-Person-centred](http://tinyurl.com/UniLanc-Person-centred)
- Social Care Institute of Excellence (2013) *Getting to Know You*. [tinyurl.com/SCIE-getting-to-know](http://tinyurl.com/SCIE-getting-to-know)

## BOX 2. ONE-PAGE PROFILE IN PAEDIATRICS

Eight-year-old Fay Carter\* developed serious backache. Within 24 hours, she was completely immobile and admitted to hospital with a bone infection.

After several sleepless nights and mounting stress levels, her mother described herself as "ranting at hospital staff - not about a lack of care – but about a lack of personal support for my daughter".

However, Mrs Carter realised that the staff could not support Fay in a personal way if they did not have the information to do this, and that her daughter needed to share information in a clear, concise way. Mrs Carter had experience of working in social care and of one-page profiles.

She chatted with Fay about what made a good day and a bad day in hospital and used this to explain what was important to her and what good support for her would look like. The

one-page profile was shared with the nurses on the ward, as well as doctors, radiologists and phlebotomists.

Mrs Carter said "the one-page profile gave us back some control in an environment where control is often lost".

The information shared in the profile resulted in some significant changes. For example, Fay was told the name of the nurse who was responsible for her that day first thing in the morning rather than late morning. This reassured her and got her off to a better start. Staff knew how important it was for Fay to take her blanket with her so she would feel comfortable in places that were often frightening such as the MRI scanner.

One of the most important pieces of information on the profile was to avoid Fay's left thumb and left arm for blood tests and cannulas as she sucked her left thumb.

\* The patient's name has been changed