



**A PROFESSIONAL
GROWTH MODULE:
CLIENT-CENTERED CARE**



...Developing top-notch caregivers, one inservice at a time.

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A Professional Growth Module:
CLIENT- CENTERED CARE

We hope you enjoy this inservice, prepared by registered nurses especially for caregivers like you!

Instructions for the Learner

If you are studying the inservice on your own, please do the following:

- Read through **all** the material. You may find it useful to have a highlighting marker nearby as you read. Highlight any information that is new to you or that you feel is especially important.
- If you have questions about anything you read, please ask your supervisor.
- Take the quiz. Think about each statement and pick the best answer.
- Check with your supervisor for the right answers. You need **8 correct** to pass!
- Print your name, write in the date, and then sign your name.
- Email In the Know at feedback@knowingmore.com with your comments and/or suggestions for improving this inservice.

THANK YOU!

After finishing this inservice, you will be able to:

Define client-centered care.



Integrate your clients' personal preferences into the care plan.



Communicate with clients, families, and the care team in a client-centered way.



Discuss ways to make the physical environment more client-centered.



Discuss ways to improve the emotional health of clients.



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A Professional Growth Module: Client-Centered Care

IT'S A SQUIRRELY IDEA TO PIN DOWN!

Client-centered care may seem like a popular “catch-phrase” that is thrown around willy-nilly these days. It’s in the mission statements for most hospitals and caregiving organizations; special committees are organized to address it; and plenty of money is spent to get client feedback on it.

But, what exactly is **it**? Many healthcare organizations and individuals struggle with the concept. ***It’s a “squirrely” idea to pin down!***

At first, it may seem like a no-brainer. You think, ‘*of course, the client is the center of care.*’ After all, doctors don’t see clients just so they can have something to do all day. Home health nurses don’t go into clients’ homes just to meet their dogs or admire their decor. The client needs care. The client is the reason anyone in healthcare does anything. That seems pretty “client-centered.”

Caregivers are professionals who know what they are doing. Clients are people who need help with a specific illness or injury. The two parties come together and (fingers crossed) the client is “fixed.” The client gets what he or she needs to fix the problem. End of story, right?

Not quite! The days when healthcare providers were the only experts, family members were merely visitors, and clients were body parts to be fixed, are over. There is SO MUCH MORE to the equation!

True client-centered care means:

- Healthcare professionals understand that clients are consumers who have choices and need clear, accurate information.
- The client has a voice that *overrides* the care team’s “schedule.”
- Care isn’t just delivered by healthcare professionals. There must be opportunities for *loved ones* to be involved.
- A healing physical environment, food, spirituality, and emotional support are *just as important* as pills, monitors, and machines.

Keep reading to learn all about client-centered care (also commonly referred to as “person-centered care.” You’ll find out exactly what it is and you’ll discover your role in making it a reality for the clients you care for every day!

WHAT IS CLIENT-CENTERED CARE?

In the “big picture” view, client-centered care is treatment that is organized around the client. It is a model in which care providers (doctors, nurses, therapists, aides, and even unlicensed caregivers) partner with clients, families, and each other to identify and meet the client’s needs.

Alongside the overall goal of quality care, client-centered care has another focus—the staff. To succeed, a client-centered approach must also address the health and well being of the staff.

“Staff” is anyone involved in the client’s healthcare experience and includes everyone from administrators, food service workers, janitors, nurses, and CNAs to telephone operators who take calls from clients.

The staff’s *ability* and *desire* to provide every client with a unique and beneficial healthcare experience is directly linked to how well each staff member feels cared for at work.

CLIENT RIGHTS AND RESPONSIBILITIES

Along with all the perks that come with client-centered care, your clients also have certain responsibilities. Remember, client-centered care is a **team effort** between clients, families, and healthcare workers. It’s not enough for a client to sit back and say, *“I am the center of the Universe. So, take care of me and make me well!”* Clients have responsibilities, too! **For example:**

- **In facilities**—Clients have a responsibility to respect the rights and privacy of their fellow patients/residents and to follow the safety rules set up by the facility.
- **In home health**—Clients are responsible for providing a safe environment for you and the other members of your healthcare team, and they must remain under the care of a physician during the time they receive home care.

All clients have a responsibility to:

- Follow the plan of care that they help create (or request reasonable changes as needed).
- Ask for more information if they don’t understand something.
- Go to all scheduled doctor appointments.

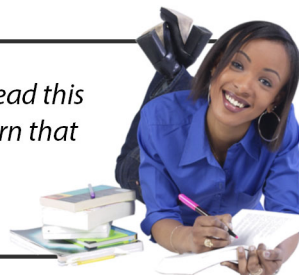


The Facts

- Client-centered care means treating patients as *partners*, involving them in planning their health care and encouraging them to take responsibility for their own health.
- On the whole, the healthcare industry is pushing away from disease-centered care and toward client-centered care.
- Client-centered care has been identified by the Institute of Medicine as one of the key actions for improving our nation’s health.
- One study found that the number of specialty-care visits, hospitalizations, and diagnostic services were significantly *reduced* among patients who received more client-centered care.

WHAT'S NEW?

Grab your favorite highlighter! As you read this inservice, **highlight five things** you learn that you didn’t know before. Share this new information with your co-workers!





WHAT EXCITES YOU?

ONE PERSON MAKING A BIG DIFFERENCE

Nearly 30 years ago, a woman named Angie Thieriot found herself hospitalized for several weeks with a fever of unknown origin.

While she knew she was receiving first-rate care, the experience left her feeling detached, ill-informed, and insignificant to her own healing process.

Soon after, both her son and father-in-law had similar healthcare experiences. The ordeal left Angie feeling unsettled and uncertain.

These experiences drove Angie to develop the model for client-centered care as we understand it today.

Angie's model addresses the universal desire for comfort, nurturing, compassion, and information when we are feeling most vulnerable.

She formed a foundation called Planetree and has been teaching hospitals across the nation how to deliver client-centered care ever since!

IT STARTS WITH THE CARE PLAN

Reading clients' medical records can be like reading a foreign language! Doctor's notes, therapist reports, labs, and other test results are all necessary parts of the client record—but none of it tells you anything **YOU** need to know about providing client-centered care for your client.

That's where the care plan comes in. The registered nurse pulls together all the information from the doctors, therapists, test results, history, and current assessment. Together with client and/or family input, the nurse creates a care plan with specific instructions (in a common language that everyone can understand) for caring for your client!

Care plans are client-centered communication tools used to inform the healthcare team what the client needs and how and why it should be done.

A Good Care Plan:

- Is *individualized* for each client.
- Looks at the client as a *whole human being*—not just as a disease or condition.
- Is used *daily* to direct client care.
- Involves all available *resources* and *team members*.
- Gets *updated* whenever there is a change in the client's health status.

What's Your Responsibility?

- **Observe your client carefully and report all observations to your supervisor.** You spend so much time with your clients that you may be the first (or only) person that knows when your client's abilities change. This is critical information because it leads to a change in the care plan.
- **Know the goals.** Every care plan includes client goals. Effective goals help direct client care and give a sense of accomplishment to the client and the healthcare team. When you know your client's goals, you can keep your client on track to accomplishing those goals.
- **Check the care plan regularly.** Review each client's care plan before each shift and discuss any questions you might have with your supervisor.
- **Your client's rights.** The care plan should be written in collaboration with the client, but clients still have the right to *refuse* any part of their care. Don't force a client to do something just because it's written on the plan of care. Record what your client has to say and let your supervisor know specifically which care was refused.
- **Attend care plan meetings.** Your presence at regular care plan meetings is valuable. You have input and insight that no one else on the team has regarding the client's preferences, abilities, emotional state, and progress toward goals.

HONORING PERSONAL PREFERENCES

Each client enters the healthcare system with his or her own personal history, established routines, and preferences. Sadly for many, it feels like the things that make them unique are the first things that are ignored. Traditional health care tends to be oriented more toward staff convenience than client preferences. ***Knowing and respecting your client's preferences shifts the focus of care from the staff-centered approach to a more client-centered approach.***

How You Do It:

- **Make Use of Available Information.** Your workplace may already have a system in place that assesses personal preferences upon admission. If this is the case, it's your responsibility to know how to find this information, read it, and apply it to your care routine with each client.
- **Do Your Own Research.** If your workplace does not gather information about personal preferences, take the time to do it yourself. Be sure to document what you learn and pass the information along to the next shift.

Here are some questions you can ask your clients:

- What do you like to be called? *(Healthcare workers are usually taught to refer to everyone as Mr. or Mrs. So and So, but some people prefer their first names or nicknames.)*
- What time do you usually wake up in the morning? What's your typical morning routine? Do you like breakfast right away, or do you like to wait until after you...shower, have a BM, watch the news, etc.?
- What time do you like to go to bed? What's your usual bedtime routine?
- Do you have any food preferences we need to know about? This may be ethnic preferences, vegetarian, allergy related restrictions, or religious preferences, such as a Kosher diet.
- Do you prefer to shower daily or do you like to just wash up each day and shower a couple of times a week?
- How do you feel about visitors? Is anyone welcome any time? Or do you prefer visits at a certain time of the day and limited to a certain amount of time? Is there anyone you don't want to see?

What Others are doing . . .

Inspired by the memory of a patient, Alegant Health Lakeside Hospital created a "My Story" poster that serves as a communication tool for the entire healthcare team. The poster features a series of questions that the patients or their loved ones can answer in writing to help caregivers learn more about the client's personal story. A "My Story" poster example is included in the instructor's packet for this inservice.



CONNECT IT!

WHEN COMMUNICATION IS A CHALLENGE . . .

How do you know what your client's personal preferences are if he or she is unable to speak?

You can ask family members about your client's likes and dislikes, and you can observe your client during routine activities.

If your client appears happy or content (is involved, pays attention, smiles) during an activity, then you can assume your client enjoys it!

Notice how your client feels during:

- Tub baths, showers, or bed baths.
- Watching certain programs (news, cartoons, dramas, comedies).
- Visits from certain family members or friends.
- Listening to music.
- Spending time outdoors.



THE NEXT STEP!

NON-DRUG PAIN RELIEF

Not all pain relieving measures require a doctor's order! Here are a few things you can do on your own to help clients feel more comfortable:

- **Distraction**—Play a game, watch television or a movie, or get them to talk about the “old days.”
- **Massage**—Offer a massage after a warm bath, before bed, or any time the need arises.
- **Music**—Music can reduce tension and anxiety.
- **Positioning**—Immobile clients should be gently repositioned at least every two hours to reduce pain.
- **Reading**—If your client can read, provide plenty of reading materials. If your client is unable to read, offer to read to him.
- **Prayer**—Research shows that prayer is the most common non-drug way of controlling pain.
- **Comfort foods**—Comfort food can make people feel physically and mentally better!

PROVIDING PHYSICAL COMFORT

Traditional healthcare environments tend to be sterile, cold, and not physically comfortable. If you care for clients in their own homes, you have the advantage because clients' homes tend to be “just right” for the client who lives there! (But there are still a few things you can do to make sure the client is comfortable.) If you care for clients in a facility, there are *definitely* things you can do to make the environment more comfortable.

What You Can Do:

- **Privacy.** In homes and facilities, privacy is a big deal! Be sure your client has privacy to use the bathroom, get washed, use the telephone, sleep, or whatever else he or she requires privacy to do.
- **Temperature.** It may be 95 degrees in the room and 105 outside, but if the client is comfortable, that's all that matters! Be sure your client has access to temperature controls. If there is no way to provide direct access, make a point to ask how he or she feels and adjust the temperature accordingly.
- **Lighting.** The bright, fluorescent overhead lighting that is required to perform certain procedures in the healthcare setting can make your clients feel awful. It's harsh and glaring. It can make vision difficult. It affects moods and can even disrupt sleep patterns. Make use of natural light from windows as much as possible. Give clients control of lighting and access to bedside or table lamps and night lights.
- **Views to the outdoors.** Studies show that patients with bedside windows that have natural views (trees, garden, etc.) need significantly less pain medication and have fewer complications than patients without a view.

CONTROLLING PAIN

Being in pain can make people feel powerless, depressed, and hopeless. A common feeling among pain sufferers is that they think requesting help with pain is a burden on staff. They get this feeling after being ignored, forgotten, or even belittled for expressing pain. The bottom line is:

Every client has the right to pain relieving measures.

Get in the habit of asking (and reporting) your client's pain level. Use your workplace guidelines, or use the 10 point scale. Ask your client to rate his pain on a scale of 0 to 10 with “0” being no pain and “10” being the worst pain ever.

Clients who are nonverbal may show pain in other ways like wincing, frowning, crying, or holding the painful area.

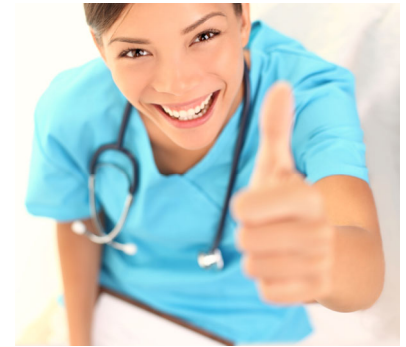


PROVIDING EMOTIONAL SUPPORT

Healthcare professionals are experts at solving problems or “fixing things.” But providing “emotional support” is the opposite of “fixing things.” It involves active listening, a relaxed but engaged body posture, eye contact, and reassuring touch (when culturally appropriate), and listening to the emotions and needs of the individual. When people feel emotionally supported, they feel heard, understood, and not alone.

Here are some ways you can provide emotional support:

- **Be Genuine.** Being genuine means you are open, honest, and sincere in your interactions with clients.
- **Express Empathy.** Having empathy means you understand your client’s feelings accurately. You convey understanding to the client and act on this understanding in a helpful way.
- **Be positive.** Maintain a positive attitude during your work with clients and their families. (Keep it genuine. Don’t put on a “phony” cheerfulness.)
- **Be available to listen.** If your clients or their family members want to talk about how they are feeling, let them know you are there for them. Don’t worry about saying exactly the right thing. The most important thing you can do is listen while they express their feelings.
- **Normalize the Experience.** Clients and families need to hear that what they are going through is “normal.” Although every person’s experience is unique, they will also benefit from hearing they are not “crazy,” and that their feelings, fears, and even disease progression are “normal.”
- **Find Sources of Hope & Meaning.** When appropriate, talk to your supervisor about making a referral for the client to speak to a chaplain, social worker, or counselor to help clients and their families find hope and meaning. A larger framework of meaning can provide a sense of purpose and ease suffering. Keep in mind, it’s important to respect the religious beliefs of your clients—even if you disagree with them.
- **Help Clients Find Diversions.** One way to promote emotional well-being is to provide a temporary break from illness, pain, or suffering. Visits from family, a walk outdoors on a sunny day, even an exciting sports event can divert the mind away from a problem, even for a short while.
- **Family Members Need Emotional Support Too.** If you notice that a client’s family members are overwhelmed and exhausted, tell your supervisor. For home health clients, there may be a program for “respite care” (during which the client is placed in a facility for a few days to give the family time to rest). In facilities, counselors and other resources may be available to help family members cope.



THINK ABOUT IT!

HOW DO YOU KNOW IF YOU’RE GETTING IT RIGHT?

After all the reading, training, practicing, and discussing client-centered care, how will you know you’re actually doing it right?

That’s easy! You’ll ask the clients!

There are plenty of evidence-based surveys available for employers to use that measure client satisfaction as it relates to the concepts of client-centered care.

In these surveys, clients are asked how well their personal preferences were met, and if they felt the staff explained things in a way that made sense.

- ***How well would your workplace do on one of these surveys?***
- ***What can you do to improve your client satisfaction on a survey like this?***

CLIENT-CENTERED COMMUNICATION

Communication with patients and families about *all* aspects of their care, treatment, or services is a critical part of client-centered care. When patients know what to expect, they have more choices, they make better decisions, and they have more realistic expectations. **Here are a few tips to keep your communication client-centered:**

- **Introduce your self and explain your title and your role.** Let the client know exactly how you are going to help him or her.
- **Orient early and often.** Help your client “learn the ropes” by explaining what to expect and who to call for help.
- **State the “goal” for the day.** At the beginning of each shift, agree on the plan or goal for the day with your client. That way you will both be on the same page.
- **Focus on the human—not the task.** Slow down and talk calmly and casually while you provide care. Provide plenty of time for clients to ask questions about what you are doing.
- **Make yourself available.** Give your client clear instructions on how to reach you (or someone else who can help) whenever a need arises. Let the client know it is okay to ask for help and that you (or one of your co-workers) will be there when the client needs you.



COMMUNICATION WITH FAMILY MEMBERS

When you care for a client, you often have family members around who want to know what's going on and how they can help! **Here's how you do it:**

- **Make time to talk to the client's family.** Open the line of communication with family members early in the relationship. Family members may have useful information about your client's likes and dislikes, routines, and preferences.
- **Do not lie to the family.** If they want to know more than you can tell them, encourage them to talk with the doctor. Recommend making a list of questions so they will be sure to remember everything.
- **Give brief but positive reports.** If a family member must leave, offer a brief description of what happened while the client was left in your care. For example, you might tell the family member that the client, *"took a little nap and ate some lunch."* Or, *"While you were out, the doctor came for a visit. I can get the nurse to talk to you about what happened during the visit."*
 - **Offer support and comfort.** Remember, this is a very stressful time for the family. Expressions of empathy will help the family feel supported and confident. You might say, *"It must be really hard to see your wife so sick."* Or, *"I understand how hard this can be. I'm here if you need to talk."*
 - **Involve the willing!** If a family member wishes to help, give instructions on providing daily care, such as bathing, grooming, turning, and changing wet or soiled briefs or bedding.

ACCESS TO INFORMATION AND PATIENT EDUCATION

Healthcare consumers are bombarded with health related information in TV commercials, in the news, and on the internet. But healthcare providers tend to be “stingy” with their knowledge. Healthcare workers have to get comfortable with sharing the information that patients need to know. Education and the exchange of information is a key component of the healthcare experience.

What Others are Doing . . .

Customized information packets, community health libraries, open chart policies, and bedside exchanges of information all help clients become informed, active participants in their own care. Open communication and education promote the partnership that helps move clients toward the goal of optimum health.

THE HEALTH OF THE HEALTHCARE TEAM

At the beginning of this inservice, you learned that the overall goal of client-centered care is quality care for the client. But, remember, the caregiving team must be healthy in order to make it all happen.

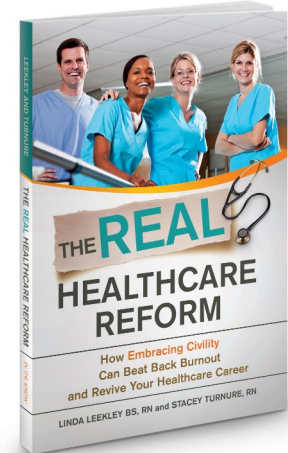
Poor workplace relationships ruin communication and make providing client-centered care nearly impossible. It leads to increased medical errors, decreased patient satisfaction, adverse outcomes, and even higher healthcare costs.

But, did you know that you have the power (and bear the responsibility) to turn things around? You may wonder how one person can look beyond the bad behaviors of others, remain professional, and maybe even improve the situation. You do it by embracing civility!

Here are the top ten ways to *embrace civility* at work:

1. **Remain patient and calm.** You may be tempted to “fight fire with fire” when a co-worker is rude or disrespectful. But, by remaining patient and calm, you can tame even the crankiest critic!
2. **Pick your battles.** You can’t agree with everyone on every issue. But, when you and a co-worker do disagree, make sure the issue is really important. Don’t fall into the trap of disagreeing just because you want to be “right.”
3. **You can’t always be right.** If you’re always right, you’re doing something wrong. Try to separate your knowledge from your opinions. Allow others to have their own beliefs and opinions.
4. **Listen.** Truly focus and listen to others when they speak. Being a good listener is a strong display of your commitment to embracing civility.
5. **Kick the gossip habit.** Other people at work may continue to gossip; that is out of your control. However, you can make a personal decision to “just say no” to workplace rumors, hearsay, and innuendo.
6. **Say please and thank you.** If good manners have fallen out of fashion at your workplace, try becoming the role model for manners. Sit back and watch as others follow your lead.
7. **Search for the “good” in everyone.** You don’t have to like, or even agree with people to get along with them. Find one good thing in everyone you meet. You can mention it or keep it to yourself. Either way, it will change your perspective of difficult people and their behaviors.
8. **Flex your flexibility.** Being flexible means you remain open to listen, to learn, and to change—even when change seems difficult or unnecessary.
9. **Acknowledge your mistakes.** No one is perfect. If you make a mistake, own up to it right away. Do what you can to reverse any effects of your mistake. Apologize. Accept any criticism you receive, learn from it and move on!
10. **Find something (not someone) to laugh about.** Dealing with rude a high stress workplace can leave you feeling exhausted, frustrated, and unhappy. Counter these negative feelings by finding something to laugh about! Laughter can decrease stress and tension, improve morale, and help you promote stronger working relationships.

The **POWER** to create change!



Would you like to know more about embracing civility on the job?

**THE REAL
HEALTHCARE REFORM:**
How Embracing Civility Can Beat Back Burnout and Revive Your Healthcare Career!

Available for purchase as a single book or as part of a **complete civility training program**.

READ A SAMPLE CHAPTER TODAY AT:

Amazon.com

Single books available at:



or directly from
www.knowingmore.com

Complete **Civility Training Program** packages must be purchased directly from **www.knowingmore.com**



FIVE KEY POINTS!

REVIEW WHAT YOU LEARNED!

1. Client-centered care is a model in which the entire healthcare staff partners with clients, families, and each other to identify and meet the client's needs.
2. Knowing and respecting your client's preferences shifts the focus of care from the staff-centered approach to a more client-centered approach.
3. Client-centered care requires active listening to the emotions and needs of the individual. When people feel emotionally supported, they feel heard, understood, and not alone.
4. Education and the exchange of information is a key component of the healthcare experience.
5. Poor workplace relationships ruin communication and make client-centered care nearly impossible.

STRATEGIES THAT EMPOWER CLIENTS

Making the shift to client-centered care means seeing your client as an **equal partner** in the healthcare relationship. Some clients will take on that role willingly. Others will need to be empowered to take the reins and step into a new role.

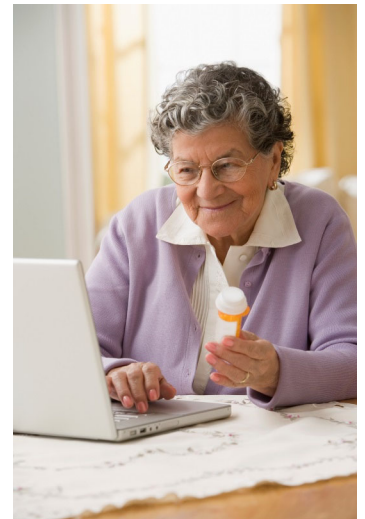
Help your clients understand that they are not merely passengers on the healthcare airplane. Give them the knowledge and confidence to be your co-pilot! **Here's how you do it:**

- **Access to reputable information.** Chances are, your clients are looking for health-related information on the internet. Unfortunately, much of what they find can be misleading or even dangerous. Help your clients find the best information possible by guiding them to trusted health-related web sites.

Here are a few good choices:

- ⇒ Medline Plus at <http://medlineplus.gov>
- ⇒ Medscape at www.medscape.com
- ⇒ Web MD at www.webmd.com

Directing patients and family members to resources that are accurate and up-to-date is an easy way to empower them with information that can guide their decision making and their own self care.



- **Making Choices and Participating in Care.** Instead of marching in and announcing what you are going to do for the client, try approaching the client with *options*. For example, you might say *"You seem like you're feeling better. Would you like to try and wash up yourself at the sink today, or do you want to stick to the routine and use the basin in bed?"* Giving your client choices increases the likelihood that she will feel empowered, participate fully, and get a maximum benefit.
- **All Questions are Important.** There is nothing more discouraging for clients than feeling ignored, belittled, or even punished for asking questions about their care. Invite your clients to ask you anything that's on their minds. Let them know that there are no "stupid" questions. When they do ask a question, be open and honest with your answers. If you don't have the answer, help your client get in touch with the person who can help.

FINAL THOUGHTS ... MYTHS BUSTED!

MYTH #1: CLIENT-CENTERED CARE IS “NICE,” BUT IT’S NOT IMPORTANT.

- **Fact:** There are some healthcare providers out there who mistakenly believe that client-centered care is all about cookie baking, pianos, and pet visits. While those things are part of the picture, they don't tell the whole story. Yes, there are some aspects of client-centered care that perhaps are not essential to patient care, but they certainly do contribute to a more pleasant healthcare experience. And just because something is "nice," does not mean it is not important.

MYTH #2: PROVIDING CLIENT-CENTERED CARE IS THE JOB OF NURSES.

- **Fact:** Caring for clients is not just a function of nursing, it is a function of every staff member, whether they be a housekeeper changing linens, a billing specialist reviewing a patient's balance, a dietary aide delivering a patient tray, or a maintenance person shoveling snow from the sidewalk. Every staff member is a caregiver, and every staff member is expected to care for client and family needs.

MYTH #3: OUR CLIENTS AREN'T COMPLAINING, SO WE MUST BE MEETING ALL THEIR NEEDS.

- **Fact:** No matter how well you are doing, there is ALWAYS room for improvement! Even if you are getting survey results that report high percentages of client satisfaction “always” ratings, it may be more useful to ask about those survey questions where patients have responded “sometimes” or “never.”

MYTH #4: BEING CLIENT-CENTERED IS TOO TIME-CONSUMING—STAFF IS STRETCHED THIN AS IT IS.

- **Fact:** Chances are, you didn't get into the healthcare field for the documentation, inservices, and meetings that take up so much of your time. Client-centered care gives you the opportunity to do the work you likely entered the healthcare profession to do—caring for patients, and supporting families. Client-centered care actually *saves* you time, and reduces the emotionally intense interactions that occur when clients feel alienated, disempowered, and upset that their needs are not being met.

MYTH #5: PROVIDING CLIENT CENTERED CARE IS TOO COSTLY.

- **Fact:** Sure, client-centered care can be enhanced with technology, renovations, and new equipment, but when you get down to the nitty-gritty, it's really all about human interactions. It's about attitude, kindness, compassion, and empathy, all of which are completely free!



WHAT I KNOW NOW!

Now that you've read this inservice on client-centered care, jot down a couple of things you learned that you didn't know before.

[illegible]



EMPLOYEE NAME
(Please print):

DATE: _____

- ***I understand the information presented in this inservice.***
- ***I have completed this inservice and answered at least eight of the test questions correctly.***

EMPLOYEE SIGNATURE: _____

SUPERVISOR SIGNATURE: _____

Inservice Credit:

☐ Self Study	1 hour
☐ Group Study	1 hour

***File completed test
in employee's
personnel file.***

A Professional Growth Module: Client-Centered Care

***Are you "In the Know" about client-centered care? Circle the BEST choice.
Then check your answers with your supervisor!***

- Client-centered care is treatment that is organized around the:**
A. Client's disease. C. Physician.
B. Nursing schedule. D. Client.
- Knowing (and acting on) the fact that your client likes breakfast after her shower is an example of:**
A. Client-centered communication. C. Providing emotional support.
B. Honoring personal preferences. D. None of these.
- Your client tells you she doesn't understand why she has to do her range of motion exercises and she refuses to do them any more. You should:**
A. Support her in her plan to stop doing exercises.
B. Urge her to talk to the doctor or nurse for more information before deciding.
C. Tell her exercising actually works better than the medicine she takes.
D. Tell her all the bad things that could happen if she skips the exercises.
- A good way to empower your clients is to give them:**
A. Access to information. C. The chance to ask questions.
B. Choices. D. All of the above.
- True or False**
Providing client-centered care is expensive and not really important.
- True or False**
Client-centered communication includes communication with the client, the family, and the entire care team.
- True or False**
It's impossible to honor client preferences if the client cannot speak.
- True or False**
Poor workplace relationships make client-centered care impossible.
- True or False**
Client-centered care means the clients must be involved in the care planning process.
- True or False**
Helping client with pain relief is important, but not part of client-centered care.