
CONFERENCE ABSTRACT

One of the Team - Person-Centred Integrated Care

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Helen Tucker¹

1: Patient Advisor, United Kingdom

Introduction

Integrated care has been a theme throughout my career, involving designing, supporting, managing and researching integrated care systems in community hospitals and community services. My PhD in integrated care demonstrated the need to promote person centred care in an inclusive way.

I wanted to share my positive experience of the breast cancer care pathway in NHS healthcare system in the East of England from screening, diagnosis, treatment and recovery. This gives an opportunity to recognise and share good practice, and consider transferable learning from a patient perspective.

Aims Objectives Theory or Methods

My aim was to reflect on my experiences of receiving breast cancer care against key integration frameworks such as the nine pillars of integrated care and to identify what mattered to me. I wanted to celebrate good practice and share transferable learning.

I conducted an autoethnography of my personal experience with observations and reflections. I have then analysed this account incorporating my background, knowledge, expertise and experience of integrated care theory and practice. Learning points have been drawn from key highlights of how my care was conducted.

Highlights or Results or Key Findings

I experienced multiple types of integration including horizontal, vertical and multi-agency as well as person-centred integrated care. I found 8 features that enhanced my positive experience of person centred integrated care. (1) Certainty as I knew what was happening at every stage.

(2) Communication systems worked well including providing me with portal access to my records and texting appointments.

(3) Contact names were given to me of the whole team, including practitioners and support staff.

(4) Compassion was shown by everyone involved in my care.

(5) A Cohesive service and team.

(6) Continuity of care across disciplines, sectors and agencies.

(7) Collaboration between team members who clearly respected each other. (8) Care that I could trust and that was inclusive. I was made to feel part of the team.

Conclusions

My personal experience of breast cancer care in the NHS suggests the concept of the “resourceful patient” is becoming a reality. This experience has given me confidence that person-centred integrated care is becoming embedded in our NHS cancer services and leading to improved experiences and quality of care.

Implications for applicability/transferability sustainability and limitations

Patient stories are an invaluable way of learning about health care services and systems, and in particular identifying quality improvements in experience and outcomes. My reflections suggest that the systems worked well, and that there was a culture of person-centred integrated care that was inclusive.