

# Documents & Dialogue: Evaluating PCC in service delivery

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# Overview of Session

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1. What are documented systems of care?
2. Why consider documented systems of care?
3. How can we evaluate them?
4. What do they tell us about PCC?

# What are Documented Systems of Care?

- Technological age – range of forms; dynamic; rapid dissemination to a much broader audience
- content, manufacture, function & / or form
- DSC – documents (primarily textual but not exclusively so) that serve to guide & frame service delivery
- May be general (eg. health or social systems in general) or particular (eg. system of continence care; system of dementia care within an organisation)

# Why consider Documented Systems of Care?

**“Documents have effects”**

(Prior, 2003, p.4)

# DOCUMENT MATRIX

Document Levels	Document Types	Document Purpose	Examples from this research
<b>Level 1:</b> Higher order docs	Organisation Philosophy; Mission Statement; Goals; Values	These documents identify organisational aims & mission; values & goals for client care. Abstract and philosophically oriented docs.	Philosophy of Care; Mission Statement; Vision; Values
<b>Level 2:</b> Mid-range docs	Organisational Models; Policies; Procedures	These documents identify how the vision; values and goals will be enacted / achieved in practice. Application focused docs. They guide action and should align actions (level 3) to goals (level 1).	Dementia Model of Care; Caring Tips brochure; Dementia Systems View; Dementia education & training materials
<b>Level 3:</b> Care docs	Care planning and assessment documents	These documents exist at the interface between an organisation's staff and clients. Action oriented docs.	Care Plans; Assessment Charts / Forms; Progress Notes; Activity Plans
<b>Level 4:</b> Experiential / Outcome docs	Interview Transcripts; Field Notes Client satisfaction surveys	These documents reflect the experience of care. Outcome oriented docs.	interview transcripts – resident; family; & staff

# METHOD

Document Levels	Document Types	Document Purpose	Examples from this research
<b>Level 1: Higher order docs</b>	•Organisation Philosophy; Mission Statement; Goals:	•These documents identify organisational aims & mission; values & goals for patient care.	•Philosophy of Care; Mission Statement; Vision; Values
<b>•Across level analysis</b>			<b>•Drill down analysis</b>
<b>Level 2: Mid-range docs</b>	•Organisational Models; Policies;	•These documents identify how the vision; values and goals will be	
<b>•Across level analysis</b>		Application focused docs. They guide action and should align actions (level 3) to goals (level 1).	
<b>Level 3: Care docs</b>	•Care Documents	•These documents exist at the interface between organisation's	
<b>•Across level analysis</b>		docs.	•Care Plans; Assessment Charts / Forms; Progress Notes; Activity Plans
<b>Level 4: Experiential / Outcome docs</b>	•Interview Transcripts;	•These documents reflect the	•QOL Interview transcripts – resident; family; & staff
<b>•Across level analysis</b>		oriented docs.	

# RESULTS – Across Level Analysis

Document Levels	Document Types	Examples from this research	Findings
<b>Level 1:</b> Higher order docs	Organisation Mission Statement; Goals; Values	Philosophy of Care – Lifestyle Approach; Mission Statement; Vision; Values	<p><u>Purpose:</u> Aspirational documents; based on responsiveness to individual need</p> <p><u>Core elements:</u> Individual at the centre. <u>Values:</u> honesty, integrity, trust, caring, respect and openness</p> <p><u>Message:</u> Relationships, care, etc are designed to enhance choice, health; wellbeing; participation and life-long growth.</p>
<b>Level 2:</b> Mid-range docs	Organisational Models; Policies; Procedures	Dementia Model of Care; Caring Tips brochure; Dementia Systems View; Dementia education & training material	<p><u>Purpose:</u> To guide care of the PWD; staff education and training</p> <p><u>Core elements:</u> based on person-centred care; uniqueness of each individual. Aligned to the National Framework for Action on Dementia (2006 – 2010) (2006)</p> <p><u>Values:</u> Inclusion, respect, personhood, sustaining, flexibility</p> <p><u>Message:</u> 1) PWD is an individual whose personhood is to be valued and respected. 2) staff knowledge, skill and specialist support is a vital component of dementia care.</p>

# RESULTS – Across Level Analysis

Document Levels	Document Types	Examples from this research	Findings
<b>Level 3:</b> Care docs	Care Documents	Care Plans; Assessment Charts / Forms; Progress Notes; Activity Plans	<u>Purpose:</u> Assessing, planning and documenting care. Auditing and accreditation. <u>Core elements:</u> bio-psycho-social data; <u>Values:</u> implied: bio-medical in nature, prescriptive, <u>Message:</u> strong emphasis on physical care and limitations; less emphasis on psychosocial care and capacity.
<b>Level 4:</b> Experiential docs	Interview Transcripts; Field Notes	QOL interview transcripts – resident; family; & staff; research field notes.	<u>Purpose:</u> To explore experiences of care <u>Core elements:</u> relationships; communication; <u>Values:</u> implied: respect, acknowledgement, time and genuine interest <u>Values:</u> time, working well together, being nice <u>Core elements:</u> relationships, time, management support <u>Message:</u> tension between philosophy and practice; rhetoric and reality.

# RESULTS:

## OVERARCHING DOCUMENTS



1. Research / Professional Guidelines / EBP / 2. Legislation & Regulation			
Document Levels	Document Types	Document Purpose	Examples from this research
<b>Level 1:</b> Higher order docs	Organisation Mission Statement: Goals; Values	These documents identify organisational aims & mission; values & goals for client care	Philosophy of Care; Mission Statement; Vision; Values
<b>Level 2:</b> Mid-range docs	Organisational Models; Policies; Procedures	These documents identify how the vision; values and goals will be enacted / achieved in practice. They guide action and should align actions (level 3) to goals (level 1)	Dementia Model of Care; Caring Tips brochure; Dementia Systems View
<b>Level 3:</b> Care docs	Care Documents	These documents exist at the interface between an organisation's staff and clients.	Care Plans; Assessment Charts / Forms; Progress Notes; Activity Plans
<b>Level 4:</b> Experiential docs	Interview Transcripts; Field Notes	These documents reflect the experience of care.	interview transcripts – resident; family; & staff

# IMPLICATIONS FOR PCC

- Need to consider documents as powerful drivers of behaviour / action
  
- Application beyond research – QA & document audits
  
- Need for alignment of all documents / texts within a documented system of care
  - » Benefits of alignment to clients, staff & organisation



THANK YOU

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