



21 July 2021

ISRRT Position Statement: The Patient/Person Centered Care Continuum

The Australian Society of Medical Imaging and Radiation Therapy (ASMIRT) is the peak body representing medical radiation practitioners in Australia. Our aims are to promote, encourage, cultivate and maintain the highest principles of practice and proficiency of medical radiation science, always mindful that the welfare of the patient should be at the centre of everything we do.

ASMIRT are pleased to see that this document has been written that provides consideration for patient centered care. ASMIRT would like to provide the following comments to this document.

- ASMIRT suggests that a brief summary of the rationale (purpose and intent) for the document would be helpful, to provide some context around why this document was written.
- The wording in the document is a little awkward and a bit repetitive. ASMIRT suggests that the summary be made a little clearer for ease of reading, and less overlap in the following points:
 - Respect for values, preferences and expressed needs.
 - Treated with dignity & respect. -
 - Encourage and support participation in decision-making.
 - Share information with patient, family and carers.
 - Provide information, communication and education.
 - Foster collaboration with patient, carer, family, health professionals in developing health services, service delivery, and valuation.
 - Physical comfort.
- ASMIRT Suggests the following wording as an alternative which addresses and acknowledges values/preferences/expressed needs:

Good patient care includes encounters that are compassionate and focussed on the patient as an individual. Our patients require good communication and emotional support. We need to engage the patients in the process by providing them and their support people with education about the procedure; what is going to happen, how to prepare, how it will feel, and make sure there is time for questions. This should be the process for every patient in daily practice. We must also ensure that we take the time to introduce ourselves and make the patient feel like a person rather than another procedure.

The concept and ideas above have been paraphrased from - *Bolderston et al 2016 Patient experience in medical imaging and RT, Journal of medical imaging and radiation sciences.*

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- Alternatively, if the author wishes to retain the list of the eight key principles of person-centered care, then a short description or explanation of what each of the items relate to would provide more context and meaning for the reader.
- ASMIRT also believe that there needs to be a more significant mention of the importance of informed consent (including financial consent) and confidentiality in the key points. Currently it feels as if it has just been mentioned in passing in the body of the text. Although the dot point *Share info/provide info/foster collaboration* may be the equivalent, these points can be expanded to discuss the provision and sharing of information with the patient and foster collaboration, with the patient included as a significant participant in the decision-making process around their treatment.
- The document feels a little incomplete and unfinished as it concludes abruptly. ASMIRT suggests the addition of a concluding remark.
- This document will require page numbers and check consistency of referencing.



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