



Planetree



Planetree

**GUIDE TO
PERSON-CENTERED
COMMUNICATIONS**



ABOUT THIS GUIDE

Words are tools. The words we use can further our mission to advance Person-Centered Care (PCC) and to humanize healthcare. They affect thinking and action, and they have power. We have the power to choose and change our words and inspire action.

With this in mind, Planetree's Global Patient and Family Partnership Council (PFPC) has created this Guide containing Planetree's repository of PCC terminology and language to be used by Planetree and Planetree's Global PFPC across all communications including marketing collateral (e.g., brochures etc.), education materials, presentations and other content published on print and online platforms.

Given that word choice reflects an organization's values, this Guide serves to standardize the words, tone, and tenor used throughout the Planetree community, and to bring a person-centered perspective and the core values of quality, compassion, and partnership to all Planetree communications.

This Guide is a living document created by Planetree's Global PFPC for use across Planetree in all aspects of communication.

WHAT IS PERSON-CENTERED CARE (PCC)?

Planetree defines PCC as care focused on the needs of individuals, guided by peoples' preferences and values, and includes supporting structures, policies, and practices that create a culture of quality, compassion, and partnership across the continuum of care.

PCC is a dynamic field of work that continues to evolve with changes in healthcare and, more importantly, the ways in which individuals would like care to be tailored to their needs, preferences, and requirements. Bringing a person-centered perspective to communications, as we hope to do with this Guide, acknowledges and centers the fact that choice of words affects the tone of and approach to our healthcare relationships, not only for individuals who provide care, but also for those who receive it.



GUIDING PRINCIPLES

Person-Centered Care is grounded in quality, compassion, and partnership. Person-centered communications reflect these core values.

Word choice must be thoughtful and deliberate to ensure that language and communication among individuals is effective, efficient, compassionate, and has the impact that is intended. Planetree's Global PFPC developed the following guiding principles based on its members' understanding of the current trends and perspectives in the healthcare world. However, keeping the ever-evolving nature of the healthcare landscape in mind, members of Global PFPC intend to review and update these guiding principles on a regular basis.

► Value Family Engagement

- Use family-inclusive language when writing about or referring to a patient and their experience. Be sure to recognize, acknowledge, and/or include mention of family partners and caregivers, where appropriate.

► Adopt a Person-Centered Voice and Tone

- Use the term "Person-Centered Care" or "PCC" in all communications as this is Planetree's focus.
- Engage your patient and family council when drafting and reviewing materials to reflect their perspective.
- Define all acronyms, abbreviations, or medical jargon when first mentioned in a document to prevent misunderstanding. For example:
 - "PCC," "EBCD," "ED," "PT," "NICU," etc.
- Use language that avoids blaming. For example:
 - "A person who is unvaccinated" instead of "anti-vaxxer."
- Some words can convey violence. Be wary of using "target," "tackle," "combat," "fight," "victim" or other terms with a violent or negative tone. Words and framing that refer to war or violence can communicate the wrong message. For example:
 - "Tackling COVID," "war on drugs," "fighting cancer," "AIDS victim," etc.



► **Care for Diverse Communities**

- Given there are many populations served by any organization, be specific when communicating about populations. For example:
 - "Person from a specific racial/ethnic background," instead of a "minority."
 - Be cognizant of a tendency to use adjectives, such as "vulnerable," "disadvantaged", and "high-risk." For example:
 - ◆ "Groups that are economically/socially marginalized" instead of "underserved communities."
 - ◆ "People who are experiencing homelessness" instead of "the homeless".
 - Racial and ethnic groups are proper nouns and should be capitalized. For example:
 - ◆ "Black" instead of "black".
 - ◆ "White" instead of "white".

► **Reference Healthcare Staff and Professionals**

- Use consistent and specific terminology when communicating to prevent misunderstanding. Be wary of using different terms interchangeably within the same communication. For example:
 - Use one of: "medical provider," "doctor," "physician," etc.
 - Use specific terms for specialists: "physical therapist," "neurologist," etc.

► **Utilize Person-First Language**

In general, keep language focused on the person rather than the condition. However, some individuals with disabilities/conditions prefer identity-first language, as they see their condition as an inherent part of their identity, rather than something that happened passively to them. It is always important to understand people's expressed preferences.

- Use person-first language. For example:
 - "Person with diabetes" instead of "diabetic."
 - "Person with a disability" instead of "handicapped."
 - "Person with a substance use disorder" instead of "addict."
 - "Person living with a mental health condition" instead of "mentally ill."
- Replace words that have negative connotations with descriptive, neutral terms. For example:
 - "Prolonged labor" instead of "false labor."
 - "History of prematurity" instead of "incompetent cervix."
 - "Older adults" instead of "the elderly."
 - "Assigned sex" at birth instead of "birth sex."



GLOSSARY OF TERMS

Care Partner: The individual, typically a family member or friend the patient designates to provide for their care and support (emotional, legal, physical, medical, etc.).

Caregiver/Carer: Friend, family, healthcare staff, and others involved in providing care to a patient and/or family. When referring to a caregiver, it is important to differentiate between a professional and a “family” caregiver.

Compassion: Occurs when one takes a step beyond empathy and acts to mitigate another’s suffering, asking, “What can be done to support this person?”

Co-Production: Relevant stakeholders, including patients and family caregivers, work as equal partners at the earliest stages of a project to share their lived experience to ensure the project is shaped around real-world experience. This approach is often used in research.

Empathy: The ability to connect with others on an emotional level, by experiencing feelings alongside another person, from their perspective.

Experience-Based Co-Design (EBCD): A participatory approach to designing care solutions *with* the people who will experience and receive it. The emotional journeys patients experience along the care pathway are explored and captured to improve the overall experience. All participants are treated as equal collaborators in the design process with their respective input being equally valued.

Family/Family Partner: Whomever the patient designates to be their “family.” This can be biological relatives, friends, neighbors and others.

Patient: An individual in need of and/or receiving medical care.

Patient Activation: Measures a patient’s readiness and ability to be engaged in their care.

Patient and Family Engagement: Involves the actual participation and meaningful interaction among a patient and family, their care team and the healthcare system. It is demonstrated by doing *with*, as opposed *to* doing *to* or *for*, the patient and family.



GLOSSARY OF TERMS (continued)

Patient Experience: The sum of all interactions shaped by an organization's culture that impact patient and family perceptions across the continuum of care.

Patient and Family Partnership Council and Patient and Family Advisory Council: A group of patient and family caregivers with lived experience dedicated to advancing Person-Centered Care through collaboration and co-design in health systems and organizations.

Person-Centered Care (PCC): Care focused on the needs of individuals, guided by people's preferences and values, and including supporting structures, policies, and practices that create a culture of quality, compassion, and partnership across the continuum of care.

CONCLUSION

This Communications Guide has been created as a foundational document to encourage individuals to broaden their perspective and, as a matter of habit, to be more sensitive to and intentional about language. It is intended as a resource for Planetree's person-centered communications.

Planetree's Global PFPC intends for this document to initiate and provoke a thought process in the healthcare world that encourages people to adopt a mindful approach in their everyday communications. The Global PFPC is committed to revising this guide on a regular basis to ensure its continued relevance.



DOCUMENT DETAILS

Title of Document	Planetree Guide to Person-Centered Communications
Authors	Planetree Global Patient and Family Partnership Council Subcommittee - Jill Adolphe, Lisa Keitel, Ashish Sharma, Lynn Vosburgh
Release Date	10/09/2024
Version	1.0

RESOURCES & ADDITIONAL READING

Advancing Health Equity: A Guide to Language, Narrative and Concepts

<https://www.ama-assn.org/system/files/ama-aamc-equity-guide.pdf>

Disability Sociology (DISABILITY PRIDE) with Guinevere Chambers, July 3, 2024

<https://www.alieward.com/ologies/disabilitysociology>

Equitable HealthCare Requires Inclusive Language

<https://hbr.org/2022/07/equitable-health-care-requires-inclusive-language>

Health Equity Guiding Principles for Inclusive Communication

https://www.cdc.gov/healthcommunication/Health_Equity.html

The Power of Words in Maternity

Advancing the Practice of Family-Centered Maternity and Newborn Intensive Care, Institute for Patient- and Family-Centered Care Conference 2003