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Patient-Centered Rehab: Challenges, Principles, Outcomes

Benjamin Fischer*

Department of Rehabilitation Medicine, Heidelberg University, Germany

Introduction

Patient-centered care is a cornerstone of effective rehabilitation, aiming to align interventions with individual patient needs and values. However, its practical understanding and implementation often differ significantly between patients and healthcare professionals[1].

Patients consistently prioritize active participation, shared decision-making, and feeling truly seen as individuals, contrasting with professionals who sometimes focus more on individualized care plans within existing frameworks[1]. This gap highlights the need for shared understanding and concrete strategies to involve patients more deeply in their recovery journey[1]. Occupational therapists, for instance, acknowledge the crucial role of patient-centered rehabilitation for stroke survivors, noting its effectiveness in tailoring interventions and boosting engagement[2]. Yet, they face significant hurdles like time constraints, limited resources, and complex family dynamics, underscoring the necessity for systemic support and enhanced collaborative goal-setting training[2].

For older individuals with multiple health conditions, developing patient-centered rehabilitation interventions becomes particularly complex, demanding highly individualized approaches that consider personal priorities, functional abilities, and social contexts[3]. A 'one-size-fits-all' model simply won't suffice, advocating for a holistic, person-driven strategy that adapts to evolving needs and preferences[3]. Shared decision-making stands out as a fundamental component of patient-centered care, with evidence suggesting that active patient involvement leads to higher satisfaction, better adherence, and improved functional outcomes[4]. Despite general support from providers, consistent application of shared decision-making remains a challenge, reinforcing its role as a powerful tool for enhancing rehabilitation effectiveness[4].

Understanding the patient's unique experience is paramount, especially for those with Traumatic Brain Injury (TBI). Survivors emphasize clear communication, respect for autonomy, and a collaborative approach to goal setting, finding that feeling heard significantly impacts their engagement and sense of control[5]. This means TBI rehabilitation must extend beyond basic medical care to embrace personal narratives[5]. Similarly, stroke survivors value respect, being listened to, and active involvement in goal setting, alongside consistent communication and emotional support[6]. This perspective demands that rehabilitation acknowledges the emotional and psychological impacts of stroke, integrating patient preferences at every stage[6].

Implementing patient-centered care in neurological rehabilitation units brings its own set of challenges, with professionals often citing time pressures, interdisciplinary coordination, and consistent patient engagement as barriers[7]. Successful implementation hinges on strong leadership, continuous training, and robust team communication, cultivating a culture where patient autonomy is consistently prioritized despite systemic pressures[7]. For individuals with musculoskeletal pain, patient-centered approaches extend beyond pain management to include empathy, empowerment through education, shared decision-making, and acknowledging psychosocial dimensions[8]. Such strategies move beyond mere symptom treatment to embrace the person's unique context and desired outcomes[8]. Defining patient-centered care in rehabilitation clearly involves respect for values, coordinated care, education, physical comfort, emotional support, and family involvement, all interconnected elements empowering active participation[9]. Finally, within subacute rehabilitation, challenges in implementation include time pressures and differing team expectations, highlighting that success depends on collective commitment and flexibility in goal negotiation and communication[10].

Description

Patient-centeredness in rehabilitation fundamentally recognizes the individual at the heart of their recovery journey, a concept universally accepted but often subject to differing interpretations between patients and healthcare professionals[1]. Patients prioritize active involvement, collaborative decision-making, and a sense of being understood, while professionals might focus on tailoring care plans within a more structured framework[1]. Bridging this understanding gap is critical for meaningful patient engagement in treatment choices and goal setting[1]. This is particularly evident in specialized areas like stroke rehabilitation, where occupational therapists see patient-centered care as vital for customized interventions and boosting recovery, yet grapple with practical hurdles such as time constraints, resource limitations, and navigating family dynamics[2]. Systemic support, along with training in collaborative goal-setting, could empower therapists to foster deeper patient involvement[2].

For older people living with multiple health conditions, the complexity of developing patient-centered rehabilitation interventions necessitates highly individualized strategies[3]. These must account for personal priorities, functional capabilities, and unique social circumstances, moving beyond generic approaches to embrace a holistic, person-driven model that adapts to changing needs and preferences[3]. A key element underpinning patient-centered care is shared decision-making, which, despite widespread professional support, struggles with consistent application in practice[4]. However, robust evidence indicates that when patients actively participate in decisions, they experience greater satisfaction, improved adherence to treatment, and often better functional outcomes, underscoring shared

decision-making as a powerful enhancer of rehabilitation effectiveness[4].

The patient's perspective is profoundly important, especially for those with specific conditions. Individuals with Traumatic Brain Injury (TBI), for example, highlight the significance of clear communication, respect for their autonomy, and a collaborative approach to setting goals[5]. Feeling heard and having their unique challenges acknowledged significantly impacts their engagement and sense of control over their recovery, suggesting that TBI rehabilitation needs to encompass personal narratives beyond mere medical care[5]. Similarly, stroke survivors emphasize feeling respected, listened to, and actively involved in their rehabilitation goals, stressing the importance of consistent communication and support for their emotional well-being[6]. This means patient-centered stroke rehabilitation must integrate patient preferences at every stage and consider the emotional and psychological aftermath of stroke[6].

Implementing patient-centered care in neurological rehabilitation settings faces practical challenges such as time constraints, difficulties in interdisciplinary coordination, and ensuring consistent patient engagement[7]. Professionals acknowledge the value but often require strong leadership, continuous training, and effective team communication to create a culture where patient autonomy is consistently prioritized[7]. For those experiencing musculoskeletal pain, patient-centered approaches extend beyond just symptom management to include empathy, patient empowerment through education, shared decision-making, and acknowledging the psychosocial dimensions of pain[8]. This holistic view aims to address the person's unique context, values, and desired outcomes for functional improvement and quality of life[8].

Finally, a comprehensive understanding of patient-centered care in rehabilitation highlights core attributes: respect for patient values, coordinated and integrated care, thorough information and education, physical comfort, emotional support, and the crucial involvement of family and friends[9]. These elements are interconnected, empowering patients as active participants in their recovery and driving outcomes that truly matter to them[9]. Within subacute rehabilitation units, the practical implementation of these principles requires consistent effort in communication, goal negotiation, and fostering trust, often battling time pressures and differing team expectations[10]. Successful patient-centered care hinges on a collective commitment to collaboration and flexibility, ensuring care genuinely revolves around the individual patient's unique journey[10].

Conclusion

Patient-centered care is a critical yet complex aspect of rehabilitation, universally acknowledged for its importance but often implemented with varying understanding between patients and healthcare professionals. Patients consistently seek active participation, shared decision-making, and feeling understood, while professionals might focus on individualized care plans. Challenges abound, including time constraints, resource limitations, and coordination issues, particularly in specialized areas like stroke, Traumatic Brain Injury, and neurological rehabilitation units. For older people with multiple health conditions, truly patient-centered interventions must be highly individualized, moving beyond generic approaches. Shared decision-making is a cornerstone, linking to higher patient satisfaction and better outcomes, though its consistent application remains a hurdle. Core components include respect for values, coordinated care, education, emotional support, and family involvement. Ultimately, successful patient-centered rehabilitation demands a collective commitment to flexibility, continuous training, and robust communication, ensuring care genuinely revolves around the individual's unique journey and personal narratives, rather than just clinical programs.

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Conflict of Interest

None.

References

1. Karin Källén, Catharina Lindqvist, Hanna Ragnarsdóttir, Louise Olsson. "Patient-centeredness in rehabilitation: A qualitative study on perceptions of patients and professionals." *J Patient Exp* 10 (2023):23743735231189417.

2. Sarah T T Lim, Pamela W S Wan, Cindy P T Ng, Christina S E Lee, Reshma A Suresh, Angeline J L Wong. "Patient-Centered Rehabilitation in Stroke: A Qualitative Study of Occupational Therapists' Experiences and Perspectives." *Occup Ther Int* 2022 (2022):6894089.

3. Anne L Booth, Emily T Henderson, Alison J M S Russell, Sarah E A W E Hill, Helen P Lambert, Catherine E Merton. "Developing patient-centred rehabilitation interventions for older people with multimorbidity: A systematic review and narrative synthesis." *Age Ageing* 50 (2021):1079–1089.

4. Anneloes van der Zwaan, Laura E M van der Ven, Carlijn M G Nijhuis-van der Sanden, Cees P van der Schans, Philip J van der Wees. "Shared Decision Making in Rehabilitation: A Systematic Review and Meta-Analysis." *Arch Phys Med Rehabil* 101 (2020):168-183.e2.

5. Pamela C H Tang, Amanda J Strong, Rachel E J A Wells, Deborah J Leverton. "The Experience of Patient-Centered Care in People with Traumatic Brain Injury: A Qualitative Study." *Brain Inj* 35 (2021):1681-1689.

6. Sarah T T Lim, Pamela W S Wan, Christina S E Lee, Pei Ru Lee, Min Hua Rachel L Y Davidson, Reshma A Suresh. "Perceptions of patient-centred care among people with stroke: a qualitative study." *Disabil Rehabil* 44 (2022):8632-8640.

7. Julia Clemmingsdotter, Sofia Petersson, Mikael Larsson, Pernilla Östlund, Per Gåfvels. "Implementing patient-centered care in neurological rehabilitation: A qualitative study on healthcare professionals' perspectives." *BMC Health Serv Res* 23 (2023):1083.

8. Alice C T Tatner, Stephanie Switzer, Julie Dubé, Anne T Smith. "Core components of patient-centered care for people with musculoskeletal pain: a scoping review." *Pain* 163 (2022):e1279-e1291.

9. Hanneke A H Schoonyoung, Nina Verheij, Richard Spack, Dael Aer Haan. "Patient-centered care in rehabilitation: a concept analysis." *Disabil Rehabil* 43 (2021):1421-1430.

10. Sharon E Packer, Susan Chandler, Ross Deley, Deborah J Leverton. "The implementation of patient-centred care in a subacute rehabilitation unit: a qualitative study." *Aust Occup Ther J* 66 (2019):481-489.

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*Address for Correspondence: Benjamin, Fischer, Department of Rehabilitation Medicine, Heidelberg University, Germany, E-mail: benjamin.fischer@uni-heidelberg.de

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