

Exploring and Expanding Patient and Family Engagement

Patient engagement has always been important for optimal healthcare outcomes. Today it is a paramount goal. Some aspects of patient engagement are now required by federal regulations, such as patient access to electronic health records. Meaningful Use Stage 2 requires providers to enable patients to view online, download and transmit their health information in a secure environment. The Affordable Care Act links reimbursement to performance on patient experience metrics. This means healthcare providers will be paid partly based on how patients rate them. Prioritizing patient engagement can improve efficiency, lessen outmigration and reduce overall costs of patient care. Bringing patients onto advisory committees and into Root Cause Analysis situations not only enhances engagement but can potentially assist in dealing with situations where patients are unable to make decisions and have no one to represent them – as well as reduce potential litigation.

Consider these potential impediments to enhancing patient involvement:

- Inconsistent patient engagement procedures throughout the healthcare organization
- Varied commitments to patient engagement methods by staff
- Patient lack of access to electronic health records
- Low health literacy among patients and families
- Patient discontent about a lack of disclosure or apologies when medical errors occur
- Risk concerns about including patients on committees and involving them in Root Cause Analysis
- Ethical issues of decision making for unrepresented and incapacitated patients
- Difficult conversations with families over futile care

Focused and systematic approaches to achieving patient involvement are vital for true patient engagement.

Solutions:

- Define a clear vision of patient engagement and achievement strategies for all departments, measures should include bedside rounds, bedside change of shift reports, patient- or family-activated rapid response teams and specific efforts to encourage family participation
- Prepare, support, hold accountable and reward healthcare teams when they collaborate with patients and families
- Launch an online patient portal for records access with security-defined data limits
- Create print and online patient-focused education materials as well as procedures for their distribution
- Address procedures for medical error disclosures and apologies to mitigate fears of litigation and cultural barriers against admitting wrongs. Emphasize that there is evidence that apologies tend to diminish blame and make injured patients less likely to sue and more willing to settle
- Explore the legal aspects of involving patients and families on hospital committees and in RCAs. Their participation can be an enriching presence if appropriate safeguards are in place and individuals are screened for suitability
- Bring multiple perspectives and disciplines to bear on decisions for unrepresented patients, including ethics consultants, patient advocates and clinicians
- Ongoing dialogue with patients and families should be about medical interventions, not “futile care.” Provide families with accurate, current and frequent prognostic estimates; address their emotional needs; and assure them that everything is being done for their loved one relating to comfort and optimizing dignity at the end of life

Individuals who may be involved in Patient and Family Engagement include:

- Risk managers
- Physicians
- Patients and families
- Patient advocates
- Customer service
- IT professionals
- Data input employees or services
- Legal department or consultants
- Marketing
- Community organizations such as AARP, March of Dimes, etc.
- Regulatory agencies