



## Communicate the hospital's vision and values related to patient and family engagement

Leaders who explicitly communicate the vision for patient and family engagement help ensure that everyone recognizes the importance of patient and family engagement for improving the safety and ~~quality~~ of hospital care.

### Incorporate patient and family engagement into the hospital's strategic plan

A hospital's strategic plan can help lay out how patient and family engagement fits into organizational processes on a daily, operational basis. For example, as part of process to integrate various entities under a common organizational umbrella, the University of Wisconsin Health system in Madison, WI added "service excellence" as a formal strategic pillar. In defining service excellence, the strategic plan emphasized the organization's focus on patient and family

### Incorporate patient and family stories whenever possible

Another strategy for conveying the importance of patient and family engagement is using patient and family stories to describe the type of care your hospital is striving to provide. This means telling patients' stories, not just sharing statistics when discussing successes and failures. Some organizations have created a policy whereby every meeting begins with a "mission moment" during which a staff member shares a story about a particular patient or reads a patient letter. The patient story establishes the tone for the meeting and reminds attendees to discuss issues with patients and families in mind.

### Share outcomes related to patient and family engagement

Leaders not only put systems into place to measure the outcomes of patient and family engagement but also share collected data and outcomes with clinicians and staff.<sup>(12)</sup> By sharing quality and safety data about the organization, leaders help create a culture of transparency and improvement. Sharing data also helps staff identify areas for improvement and allows them to see what the hospital is doing well. Sharing positive experiences can be particularly important in helping staff to celebrate successes and build on areas of strength. At Advocate Trinity Hospital, the implementation of Strategies 2, 3, and 4 from the Guide on a medical surgical unit resulted in improved CAPS® Hospital Survey scores. Hospital leadership made a point of recognizing these outstanding scores throughout the hospital.

## Serve as role models for engaging in partnerships with patients and family members

By "talking the talk" and "walking the walk," hospital leaders emphasize the importance of patient and family engagement and model how to engage in best practices daily.<sup>(13)</sup>

### Conduct leadership rounds with staff, patients, and family members

Rounding connects senior leaders and board members with patients and families and signals to staff that leadership is committed to patient and family engagement. At Alegent Health at Midlands iRapillion, NE, for example, the chief operating officer regularly conducts leadership rounds, often taking pictures of things that are inspiring and sharing the photos in presentations and newsletters to reinforce patient- and family-centered practices.<sup>(1)</sup> At Advocate Trinity Hospital, leaders conducted rounds with patients to ensure that nurse change shift reports were happening at the bedside as planned and to obtain patients' perspectives. Including patients and family members in leadership rounding teams can send an even stronger message about the importance of patient and family input and insight.



#### Helpful Link

For more information about conducting leadership rounds

Patient Safety Leadership WalkRounds

Available at:

<http://www.ih.org/knowledge/Pages/Tools/PatientSafetyLeadershipWalkRounds.aspx>

### Establish channels for direct communication with patients and family members

Senior leaders can communicate and interact directly with patients and family members in ways that publicly emphasize two-way communication. For example, the former chief executive officer of the University of Colorado Hospital Aurora, CO, started a program whereby patients and family members could send him feedback about their experiences via email. He responded to each email personally and often forwarded relevant messages to appropriate staff so that they could see the feedback, whether positive or negative. This program sent a strong signal to the entire organization on the importance of listening to patients and families.

## Create an organizational structure with a place for patient and family engagement

Creating an organizational structure with a place for patient and family engagement helps ensure responsibility and accountability for progress. The specific organizational structure for patient and family engagement and patient and family-centered care will vary from organization to organization.

For example, Cincinnati Children's Hospital created a core corporate function, housing patient and family-centered care under the senior vice president for quality and transformation. Other organizations elect to set up a small, dedicated office or department to support patient and family-centered care.<sup>(2)</sup> Still other organizations have created a steering committee for patient and family-centered care or a patient experience team with responsibility for these functions.

## Provide resources for staff positions to support patient and family engagement

Staff will need time to develop, implement, integrate, and coordinate various initiatives, such as recruiting, selecting, and training patient and family advisors or establishing patient and family advisory councils. If hiring new staff is not feasible, existing staff should be allocated time for patient and family-centered care activities. Important roles may include an executive sponsor for patient and family-centered care, patient and family-centered care coordinators, staff liaisons to facilitate the process of developing partnerships with patient and family advisors, and unit coordinators to assist with patient and family-centered care initiatives on the clinical unit.<sup>(12)</sup> These key staff members at the operational level help translate the hospital leaders' vision into practical programs and procedures. Frequently, these individuals are existing clinical staff, such as nurse leaders, who are respected and who have institutional memory and the necessary connections at both the administrative and clinical levels to get things done. Although each hospital will choose to assign resources differently, patient and family engagement activities can take up a meaningful portion of time. For example, at SUNY Upstate in Syracuse, NY, the staff champion for patient and family-centered care spends roughly three-quarters of her time on activities related to patient and family-centered care, including integrating such activities throughout the organization.



### Guide Resources

Strategy 1: Working With Patients and Families as Advisors contains additional information about the role of the staff liaison.



### Offer a range of opportunities for staff involvement in planning, implementation, and evaluation

Involving staff in all phases of initiatives helps address staff concerns and creates buy-in for patient and family engagement. For example, leaders can involve staff in developing statements of core values and new practices, ask nurses to help revise job expectations, or invite frontline staff to participate in the planning process for new patient and family engagement initiatives. Also, giving autonomy to middle-level leaders, such as nurse managers, to implement day-to-day activities helps ensure efforts are implemented in a way that works best for the staff and patients on the unit. These opportunities should complement the availability and schedule of clinicians and hospital staff so that it is not seen as one more thing to do.

It also is important to involve different types of staff in patient and family engagement efforts. For example, when Advocate Trinity Hospital implemented its bedside change-of-shift report, all staff on the unit including certified nursing assistants and unit secretaries played a role. Certified nursing assistants conducted their own bedside change-of-shift report, focusing on mobility, toileting, and bed positioning. Unit secretaries set with patients at the beginning of their shift to make sure patient needs were met and that they had their discharge packet. This participation fostered a sense of ownership, pride, and engagement across the unit.

### Communicate regularly and openly with staff

During face-to-face discussions, hospital leaders can reiterate the organization's commitment to patient and family engagement and make sure staff has the







\$40 million available in annual staff bonuses to performance on related competencies. 2) When they implemented strategies from the Guide, Advocate Trinity Hospital tied implementation to research-oriented goals required in their program for promoting nurses up the clinical ladder.

Create nonfinancial rewards and recognition.

## References

1. Frampton S, Guastello S, Brady C, et al. Patient-centered care improvement guide. Derby, CT: Planetree; October 2008
2. Shaller D, Darby C. High performing patient- and family-centered academic medical centers: cross-site summary of six case studies. 2009 [updated 2011/01/26]  
[http://www.upstate.edu/gch/about/\(a\)1/Fo\(t\)1\(e.\)5\(ed\)19T37 amted \\_c35\( o\)2\(\)6\(n\)\)](http://www.upstate.edu/gch/about/(a)1/Fo(t)1(e.)5(ed)19T37%20anted_c35( o)2()6(n)))

15. Devereaux MW, Drynan AK, Lowry S, et al. Evaluating organizational readiness for change: a preliminary mixed model assessment of an interprofessional rehabilitation hospital. *Healthc Q* 2006;9(4):674.
16. Confidential interview with the Deputy Director of Nursing and Patient Safety officer at a major academic medical center. Interview conducted by American Institutes for Research project staff. July 23, 2010.