

Engaging Patients to Improve Healthcare Quality

Mireille Brosseau and Jennifer Verma

Many health services organizations are seeking – and finding – ways to successfully engage patients in all areas of healthcare services, from planning to delivery to evaluation. Including patients in discussions and decisions about their own healthcare may seem like a good and obvious thing to do. However, assessing the success of this approach is complicated as there is little empirical evidence to show whether engaging patients affects the use of services, quality of care or patient satisfaction (Crawford et al. 2002; Nilsen et al. 2006; Simpson and House 2002).

The Canadian Health Services Research Foundation (CHSRF) is helping to fill the research gap through its Patient Engagement Projects (PEP), a \$2 million-plus initiative financed in partnership with the Health Council of Canada and the Max Bell Foundation. The goal of the PEP initiative is to find, encourage, develop and share innovative strategies that lead to true patient-centred care. Following an environmental scan and expert consultations, CHSRF's call for proposals for patient engagement intervention projects in April 2010 attracted 74 applications from across Canada, from which 10 projects were selected for funding.

How PEP Works

To be eligible, projects must have a clearly defined quality improvement component. Formal evaluations of the intervention's processes, outputs and outcomes are required, and the project must document its implications for patient-centred services.

PEP teams are brought together at least four times over the two-year project period for workshops, where they learn from invited experts and discuss their projects with peers. As well, teams have real-time access to an electronic repository and networking hub that stores documentation, shares information on the progress of projects and provides a forum for discussions. CHSRF provides teams with ongoing mentoring on patient engagement, quality improvement methods and performance measurement and evaluation.

Although the projects had been under way for just six months when this article was written, all 10 teams were already reporting significant accomplishments – not just in terms of implementing strategies but also in seeing some tangible benefits for patients. Two projects are profiled here.

Patients and Professionals Partner to Redesign In-Patient Care Systems: Improving Safety, Access and Work Environment McGill University Health Centre, Quebec

The objectives of McGill University Health Centre's project are aligned with the two principal objectives of the organization's Transforming Care at the Bedside initiative: (1) to understand the in-patient experience through the eyes of patients and families and (2) to deeply engage patients and families, along with staff, in reshaping care processes in order to respond to their real needs. The project team used a number of targeted strategies, including providing hospitalized patients with opportunities to suggest improvements; improving communication by leaving a whiteboard for messages at the patient's bedside; and holding focus groups with staff to test new ideas, practices and procedures.

After the first six months, the results, both quantitative and qualitative, were highly promising. For example, the time needed to complete the inter-professional team admission process for in-patients was reduced by a full hour. By relocating equipment and supplies, the time needed to prepare for procedures was cut in half. Staff members report that these and other initiatives have increased work efficiency, improved communication and enriched teamwork and morale.

The impact is just as profound for those receiving care. A survey conducted with patients discharged from the pilot-test units showed they believed staff were genuinely trying to listen and understand, and that interaction with staff had improved significantly.

Simulating, Studying and Sustaining Patient Engagement in a Forensic Psychiatric Hospital Provincial Health Services Authority, British Columbia

The PEP team at BC Mental Health and Addiction Services is aligning its intervention project activities with the patient engagement objectives of the Provincial Health Services Authority's 2009–2015 strategic plan. With this natural fit already in place, the team is employing several innovative tools to build a sustainable patient engagement strategy for the hospital. Three deliverables have been identified: (1) increase meaningful patient participation in decision-making; (2) create a concurrent

PEP Team Leads and Projects Funded in 2010

Johann Brink, Provincial Health Services Authority,
British Columbia
Simulating, Studying and Sustaining Patient Engagement
in a Forensic Psychiatric Hospital

Bruce Brown, St. Mary's Hospital Center, Quebec
Patients Are Partners in Improving Experiences and
Outcomes of Care at SMHC

Jennifer Rees, Alberta Health Services, Alberta
All Aboard for Patient Engagement: A Readiness Tool Kit
for Patients, Providers and Leaders

Esther Green, Cancer Care Ontario, Ontario
Engaging Survivors to Improve Patient Experiences
throughout the Cancer Journey

Sandy Litman, Glenrose Rehabilitation Hospital, Alberta
Health Services, Alberta
Multifaceted Parent-to-Parent Support Program within a
Family Support Network

Kwame McKenzie, Centre for Addiction and Mental
Health, Ontario
Bringing a Recovery Focus to Schizophrenia Services
through Client Narratives

Kelly McQuillen, Ministry of Health Services, British
Columbia
Your Voice Counts: Training Patients to Be Effective in
Designing the System

Patricia O'Connor, McGill University Health Centre,
Quebec
Patient and Professionals Partner to Redesign In-Patient
Care Systems: Improving Safety, Access and Work
Environment

Gaétan Tardif, Toronto Rehabilitation Institute, Ontario
Engaging Patients and Families to Develop Safety
Indicators

Robert Zipursky, St. Joseph's Healthcare Hamilton, Ontario
Patient Input on Developing Early Intervention Mental
Health Services

disorders peer support program; and (3) establish a Peer-2-Peer research team to evaluate the patients' experiences. Activities include building linkages with hospital management to ensure that patients' perspectives and opinions are heard and incorporated; creating opportunities for patients to discuss recovery

issues with other patients; and engaging patients as co-researchers in an evaluation study of the delivery of care at the hospital.

Six months in, the PEP team is already seeing positive results. Formal evaluations show that attendance at the hospital's Patient Advisory Committee meetings has increased considerably. The peer support program is continually attracting new members, and the Peer-2-Peer research group is meeting regularly to brainstorm ideas for the hospital's participatory action research study. Most notably, patients are engaged and excited about contributing to the initiatives. Knowing they are playing a role in helping others, they say, is improving their own care experience.

Patient Engagement Projects Objectives

Support the development, implementation and evaluation of patient engagement interventions for health services whose goal is to improve the quality of patient-centred care services

Enhance organizations' capacity to engage patients in the design, delivery and evaluation of healthcare

Increase the knowledge of promising patient engagement strategies that place patients at the core of health services, and about how and why such strategies may be effective

Next Steps for PEP

CHSRF is funding a second round of patient engagement projects in 2011 on a variety of interventions representing different elements of the health system. At least two of the funded projects will be interventions from the following areas: primary healthcare, home care, chronic care and continuity of care. As well, CHSRF is disseminating the results of a commissioned research project to determine lessons learned from the PEP initiative in an effort to document promising practices in Canada and around the world. The long-term goal is to create a set of evidence-based guidelines for effective patient engagement that can be used by healthcare organizations and providers.

For more information about the PEP initiative, contact Mireille Brosseau at mireille.brosseau@chrsrf.ca, or visit www.chrsrf.ca. **HQ**

References

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- Nilsen, E.S., H.T. Myrhaug, M. Johansen, S. Oliver and A.D. Oxman. 2006. "Methods of Consumer Involvement in Developing Healthcare Policy and Research, Clinical Practice Guidelines and Patient Information Material." *Cochrane Database Systematic Review* 3: CD004563.

Simpson, E.L. and A.O. House. 2002. "Involving Users in the Delivery and Evaluation of Mental Health Services: Systematic Review." *BMJ* 325: 1265.

About the Authors

Mireille Brosseau is the program lead in patient and citizen engagement for the Canadian Health Services Research Foundation (CHSRF), in Ottawa, Ontario.

Jennifer Verma is the director of policy for CHSRF.



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