

Meet your new designer: the patient



Unlike providers who only see the care that they're directly engaged in, the patient sees "the big picture" of care – from the diagnosis to treatment of an ailment, including (outpatient) support services. This kind of experience gives patients a different view on what happens in hospitals and other health services. And their "insights" can be helpful in designing strategies to improve the quality of care, according to results of a systematic review published in the journal Implementation Science.

The review examined 48 studies from across the globe that addressed patient participation in the design and delivery of healthcare services. The study found that engaging patients in the redesign of healthcare services can lead to reduced hospital admissions and more efficient and effective care. Specifically, higher levels of patient engagement were associated with efforts to develop higher level system outcomes for healthcare, including improved quality of care, governance and service delivery.

"We looked at all the international literature across all care settings, and we found that the more patients were engaged as partners and codesigners, the higher the level of outcomes," said the study's co-lead author Dr. Yvonne Bombard, a scientist at the Li Ka Shing Knowledge Institute at St. Michael's Hospital. "There are different levels of engagement. If patients were just consulted, often what we saw in terms of outputs were products like patient information kits. Yet active involvement of patients as partners in design was linked to more substantial outcomes like designing new delivery systems, adding support systems like a mental health advocate, all the way up to creating new governance documents and policies at the top echelons of the hospital."

However, higher levels of engagement require additional investments in training and support that would only be appropriate for larger projects, according to Dr. G. Ross Baker, professor and programme lead, quality improvement and patient safety, at the University of Toronto's Institute of Health Policy, Management and Evaluation, and co-leader of the study.

"If you really want to focus on redesigning care, you have to bring in patients in a much more active way," Dr. Baker said, noting that patients' insights can be helpful in identifying duplication, waste, failure to coordinate and other issues related to care processes.

There are successful examples of people who have engaged patients to do broad scale redesign, and we should learn from the strategies they've used, according to Dr. Baker. Some of those strategies include providing appropriate training for higher-level involvement – not just for patients but for providers as well – and being flexible and respectful of patients' time and experiences.

"Hospitals often do this on some level, but sometimes it's done in an ad hoc fashion," Dr. Bombard pointed out. "I think that does a disservice to the science of patient engagement, and over time it might start to create distrust among patients. We hope this work advances the science and methodology of patient engagement so that we're sure we're doing it effectively, for the intended purposes.

Source: <u>St. Michael's Hospital</u> Image Credit: St. Michael's Hospital

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