Patients as Partners in the Hospital Setting: Engagement Methods in Research, Quality Improvement and Beyond

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Abstract

Benefits have been demonstrated when patients and family members have been meaningfully engaged in all stages of research beginning with topic generation. When this engagement is done well, research becomes more relevant to those receiving health services, and there is an increased sense of accountability and transparency provided. However, health informatics researchers have not consistently used patient and family member engagement methods despite their many potential benefits. This panel will outline various methods that can be used to engage patients and family members in all stages of the research process in a health informatics context. In addition to these strategies, this panel will provide real–life examples of how patients and family members have been engaged in health informatics research in both Canada and the United States.

Keywords

Patient participation; health informatics; nursing research
Panel Description

There is much to be gained when patients are engaged as partners in health informatics focused research and quality improvement projects. However, patient-oriented research and quality improvement methods are still not common within this field despite their significant uptake in other domains of health research. In an effort to ensure that health information technologies can be leveraged to support patients in meaningful ways, patients need to be engaged in all stages of the research and quality improvement process.¹

This includes engaging patients in the identification of priorities for research, methods for conducting research, and disseminating findings in effective ways. This panel will provide an overview of how patients have been engaged as partners in research, quality improvement and beyond in hospital settings among different clinical populations in both Canada and the USA.

Engagement of Patients in Mental Health and Addictions Contexts to Improve Medication Safety

Dr. Strudwick will present findings from a study at the Centre for Addiction and Mental Health in Canada focused on improving medication safety during the administration process.² Patients were interviewed to determine strategies that could be employed to improve the adoption of barcode medication administration in this setting using a patient-oriented research approach by partnering with Peer Support Workers.

Patients and Care Partners Engaged in Real-Time Safety Reporting

Dr. Kang will describe the user-centered design of an innovative tool developed by Dr. Collins for patients in the hospital setting aimed at increasing safety, and implementation findings, challenges, and opportunities. To better understand, mitigate, and track safety concerns from the patient and family perspective, Dr. Collins and her team developed and implemented MySafeCare, a web-based application that allows hospitalized patients and families to electronically submit and categorize safety concerns in real time with the option to remain anonymous. Key themes related to barriers and facilitators for patient and family engagement in safety reporting will be highlighted and discussed.

Improving Team Communication and Preventing Harm in Hospitalized Patients

Dr. Dykes will present her research related to engaging all care team members including patients and family in developing tools to improve team communication and to prevent harm in hospitalized patients. A variety of traditional participatory design and systems engineering methods were used to develop a suite of tools that are currently in use by hospitalized patients and providers.

Engaging patients in the use of real-time electronic clinical data to improve the safety and reliability of their care

Dr. Schnock’s research on the My Safety Issue Dashboard, which is a patient web-application for providing real-time information about patient safety risks and tailored educational content to promote engagement in self-care, will be presented by Dr. Dykes.
The application was developed through a participatory design with patient and family members and implemented in the inpatient setting. This study is a collaboration between the University of Utah School of Medicine and Brigham and Women’s Hospital in the USA.

Conclusion

These examples will provide the audience with strategies and methods that can be practically used to engage patients as partners in research, quality improvement projects and beyond in the hospital setting.

References

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