



Executive Summary for Media

Background and Key Findings

Engaging patients and families across all levels of a health care organization is an approach shown to be associated with better outcomes in quality and the experience of care for patients. Patients and families can do more than give feedback on their experience. They can provide longitudinal and systematic feedback and recommendations to improve quality and safety such as preventing patient falls and hospital readmissions, improving hand-hygiene compliance or medication safety by partnering with health care systems. They can serve in key roles such as members of board level committees and as educators of health care professionals, students and trainees.

The implementation of the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey program over a decade ago added the imperative to provide patient-centered, high quality care. Patient- and family-centered care is working *with* patients and families, rather than just working *for* them or doing something *to* them.

In October 2020, Vizient and the Institute for Patient- and Family-Centered Care (IPFCC) launched a survey to understand the prevalence and functioning of patients and families as educators in hospitals and academic medical centers. Highlights are noted below.

- The survey found that 54% of respondents had involved patients and families when educating staff, clinicians and organizational leaders.
- There are no differences between AMCs and non-AMCs in terms of the likelihood of involving patient and family advisors (PFAs) as educators.
- When it comes to the education of students and trainees (e.g., medical and nursing students, residents, allied health students), 41% of academic medical centers involved patients and families.
- None of the AMCs scored at the highest range of the index measuring PFA involvement in medical education, with most scoring in the lower range of scores.
- Those organizations with longer and deeper experience with PFAs and with patient and family advisory councils (PFACs) are more likely to utilize PFAs in educational programming.
- When it comes to involving PFAs in medical schools, the size of AMC is significantly associated with greater likelihood of PFAs involvement in medical education (larger AMCs are more likely to involve PFAs in educating students).
- The top third of the health care organizations that involve PFAs in hospital educational efforts provide much higher level of support to the PFAs, than do the rest of the participants. The different types of support provided include training, evaluations, and reimbursement for expenses.

In some exemplary hospitals and health systems, patient and family engagement is considered a strategy within the overall framework of and commitment to patient- and family-centered care. Hospital leaders and staff as well as PFAs benefit from training for effective use of patient and family engagement and the implementation of patient- and family-centered care practices. Once trained, PFAs become effective teachers of practices that facilitate 1) collaborative communication, 2) coordination within teams and across disciplines and settings, and 3) authentic partnerships with patients and



families. Traditionally, when hospitals have involved PFAs in education or organizational training/development, the use is almost exclusively in the hospital setting.

Methodology

The study population includes 67 health care organizations from AMCs, teaching hospitals, community-based hospitals, and specialty hospitals (e.g., children's hospitals, cancer centers).

For purposes of the study, participants were grouped into two categories "AMCs" (academic medical centers) and "non-AMCs" (teaching hospitals, community-based hospitals and specialty hospitals).

Broader Implications and Moving Forward

This study reveals areas of opportunity to develop the infrastructure to support sustainable and meaningful involvement of PFAs as educators, including:

- dedicating time and resources for a staff member or clinical faculty member to serve as the coordinator or liaison for patient and family faculty;
- increasing efforts to provide specific training for PFAs to serve as patient and family faculty (e.g., storytelling training, presentation skills training);
- increasing efforts to prepare or train hospital leaders, clinicians, staff, clinical faculty to partner with patient and family faculty, especially in AMCs;
- systematically evaluating educational activities that include PFAs as educators and sharing those results with them;
- acknowledging and rewarding clinical faculty in AMCs for their work in partnering with patient and family faculty; and
- increasing reimbursement and compensation for patient and family faculty.

It also provides a starting place upon which more information and evidence can be built to realize the benefits of engaging PFAs as educators and faculty to teach students, trainees, clinicians, staff and leaders. Their engagement in education is lacking yet vital to support systems of care that are safe, equitable, patient- and family-centered and provide high-quality care at lower costs.

These findings can serve to raise awareness of the possibilities for health care organizations who are just starting on this journey, and as a call to action for those who are poised to expand the role that PFAs play in their institutions. View the full report here:

<https://newsroom.vizientinc.com/content/1221/files/Documents/PrevalenceAndFunctioningOfPatientsAndFamiliesAsEducators.pdf>

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