

ENGAGING PATIENTS TO ENHANCE PATIENT SAFETY:

A Comprehensive Approach For Healthcare Providers



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**Consortium of Accredited Healthcare Organization (CAHO)
Patients for Patient Safety Foundation (PFPSF)**

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PREFACE

"**Engaging Patients to Enhance Patient Safety: A Comprehensive Approach for Healthcare Providers**" emphasizes the critical need for patient engagement and outlines key strategies for strengthening collaboration between patients, caregivers, and healthcare providers to reduce medical errors. It analyzes risks and identifies potential errors at every touchpoint in the care pathway. It offers actionable solutions for healthcare providers, as well as practical guidance for patients and caregivers to enhance safety. The paper covers both **Outpatient (OPD)** and **Inpatient (IP)** settings, with a focus on **Patient Feedback** as a crucial component for continuous improvement in safety and care quality.

This can be used in hospital settings of primary, secondary and tertiary clinical care, independent clinics, diagnostic labs, dispensaries and ambulatory facilities by healthcare professionals.

This white paper results from detailed deliberations in a workshop involving healthcare providers, conducted by the **Consortium of Accredited Healthcare Organizations (CAHO)**, which endeavours to enhance quality and patient safety in healthcare settings. The paper was compiled by the **Patients for Patient Safety Foundation (PFPSF)**, an initiative promoted by CAHO, with the objective of raising awareness and enabling patients to collaborate with healthcare providers to reduce medical errors and improve safety.

SECTION I:

Enhancing Outpatient Safety Through Effective Engagement

Patient engagement is a two-way communication process between healthcare providers, patients and caregivers. The scope of interaction covers disease-specific information, treatment protocols, and post-care guidance to achieve better clinical outcomes and patient satisfaction. The patient's perspective and experience are considered to ensure active involvement at all stages before, during, and after treatment.

Benefits to Healthcare Providers:

- Better clinical and service outcomes with quality & safety and reduced readmissions
- More efficient and effective operations of hospitals with reduced stress for clinical & support staff
- Satisfied patients generate goodwill about the brand, remain loyal and bring referrals

Benefits to Patients & Caregivers:

- Awareness of disease and treatment protocol with early detection, timely and complete treatment
- Higher compliance with post-hospitalization care, improved clinical & psychological outcomes
- Adopting healthier lifestyle and preventive healthcare

1. The Outpatient Journey and Potential Errors

1.1 Before the First Appointment

Potential Errors:

- Patients providing inaccurate personal details or incomplete medical history
- Misunderstanding insurance coverage or payment options
- Arriving at the wrong hospital entrance or clinic

Actionable Points:

For Healthcare Providers:

- Provide clear pre-appointment instructions on the hospital website and through appointment confirmation emails or texts.
- Offer digital checklists of necessary documents and information, including a recorded message for bringing all required documents and questions.
- Ensure clear signage and provide virtual tour options for first-time visitors.

For Patients:

- Gather and organize all relevant present and past medical documents, including history of allergies and family history
- Document current symptoms and prepare questions in advance
- Verify insurance coverage and hospital empanelment, and carry relevant IDs
- Consider bringing a caregiver for support and additional information recall

1.2 Registration and Billing**Potential Errors:**

- Incorrect personal information or contact details
- Misunderstanding of costs and billing structure
- Failure to disclose relevant medical information

Actionable Points:**For Healthcare Providers:**

- Implement digital check-in systems with data verification prompts
- Provide clear, written explanations of costs and billing procedures, including online resources
- Train staff to ask probing questions about medical history and offer privacy for sensitive discussions
- Language and disability use local languages

For Patients:

- Double-check all provided information for accuracy, especially if using digital check-in systems
- Keep the hospital's UHID handy for repeat visits
- Ask for clarification on any unclear billing or cost information
- Disclose all relevant medical information, including allergies and current medications

1.3 Navigation and Waiting**Potential Errors:**

- Getting lost within the facility
- Missing appointments due to delays or confusion
- Forgetting to bring necessary documents or prepare questions

Actionable Points:**For Healthcare Providers:**

- Install clear, multilingual signage throughout the facility

- Develop a mobile app for indoor navigation and real-time wait time updates
- Provide staff or volunteers to assist with navigation and selecting appropriate consultants
- Assessment for vulnerability

For Patients:

- Arrive early to allow time for navigation and unexpected delays
- Use facility maps or navigation apps if available
- Use waiting time to organize documents and prepare questions
- Stay near the waiting area and listen for name calls or check digital displays for queue status

1.4 Consultation**Potential Errors:**

- Failure to disclose all symptoms or relevant information
- Misunderstanding diagnosis or treatment plans
- Not asking important questions or seeking clarification
- Not adhering to treatment plans

Actionable Points:**For Healthcare Providers:**

- Use patient-friendly language and visual aids to explain diagnoses and treatments
- Encourage questions and provide time for patient comprehension
- Offer written or digital summaries of key points discussed
- Implement teach-back methods to ensure patient understanding
- Make sure you are the right person to deal with patient in front of you. Otherwise, refer and escort him to the right consultant.

For Patients:

- Prepare a list of symptoms, concerns, and questions beforehand
- Take notes during the consultation or ask if you can record the conversation
- Ask for clarification on any points not fully understood
- Consider bringing a trusted person to help remember information
- Request a second opinion if there are doubts or concerns

1.5 Diagnostic Tests**Potential Errors:**

- Not following preparation instructions for tests
- Misunderstanding the purpose or results of tests

- Failing to complete all prescribed tests
- Self-medicating based on incomplete information

Actionable Points:

For Healthcare Providers:

- Provide clear, written instructions for test preparation, including dietary restrictions and medication adjustments
- Explain the purpose and importance of each test and obtain informed consent for invasive or expensive tests
- Implement a follow-up system for incomplete or missed tests
- Offer digital platforms for viewing and understanding test results

For Patients:

- Carefully follow all preparation instructions
- Ask about the purpose and expected results of each test
- Choose an accredited lab for reliability
- Ensure all prescribed tests are completed and results are communicated to the doctor
- Avoid self-interpretation of results or self-medication

1.6 Follow-up Care

Potential Errors:

- Misunderstanding follow-up instructions
- Failing to adhere to medication regimens or follow-up appointments
- Not recognizing signs of complications
- Neglecting to update other healthcare providers about new diagnoses or treatments

Actionable Points:

For Healthcare Providers:

- Provide clear, written follow-up instructions
- Please write prescription in capital letters or it is computer generated.
- Explain the doses and administration instructions and expected side effects if any.
- Use teach-back methods to ensure understanding of home care instructions
- Schedule follow-up appointments before the patient leaves
- Offer telehealth options for check-ins and minor concerns

For Patients:

- Review and ask questions about follow-up instructions

- Make sure you understand and know your medications
- Fill prescriptions and understand medication schedules before leaving the clinic
- Keep all follow-up appointments and monitor for signs of complications
- Maintain a personal health record and share relevant information with all healthcare providers

1.7 Key Areas for Outpatient Education at All Stages

To empower patients in their outpatient healthcare journey, education should focus on:

- Understanding patient rights and responsibilities in outpatient settings
- Effective communication with healthcare providers during brief encounters
- Medication safety and management at home
- Self-monitoring and when to seek medical attention
- Importance of follow-up care and adherence to treatment plans
- Navigating the healthcare system, including insurance and billing processes

2. Strategies for Effective Outpatient Engagement

- Implement Patient Advisory Councils specific to outpatient services
- Utilize multiple communication channels (verbal, written, digital) for patient education
- Develop user-friendly patient portals for easy access to medical information, appointment scheduling, and secure messaging with providers
- Offer patient education materials in multiple languages and formats, including video tutorials and interactive modules
- Implement shared decision-making tools for common outpatient procedures and treatments
- Provide access to health coaches or patient navigators for complex cases

Implementing a Culture of Safety in Outpatient Settings

- Foster open communication about safety concerns among staff and patients
- Implement non-punitive error reporting systems to encourage transparency
- Regularly review and update safety protocols based on patient feedback and incident reports
- Provide ongoing training for staff on patient safety and engagement techniques specific to outpatient care
- Conduct regular safety audits and share results with staff and patients
- Celebrate safety achievements and share success stories
- Encourage patients to participate in safety initiatives, such as medication reconciliation programs

The above strategies provide a foundation for building a culture of safety that empowers patients and supports healthcare providers in delivering high-quality, safe care in ambulatory settings.

SECTION II:

Enhancing Inpatient Safety Through Effective Engagement

3. The Inpatient Journey and Potential Errors

3.1 Pre-Admission, Hospital Selection and Insurance Coverage

Potential Errors:

- Choosing a hospital or consultant without proper research
- Misunderstanding or not fully considering financial implications of hospitalization
- Failing to verify insurance coverage and network status

Actionable Points:

For Healthcare Providers:

- Provide transparent information about hospital specialities, success rates, and patient satisfaction scores
- Offer clear, detailed breakdowns of expected costs, including potential out-of-pocket expenses
- Implement a financial counseling program for patients seeking admission
- Develop partnerships with insurance providers to offer clearer information about coverage

For Patients and Caregivers:

- Research hospitals and consultants, considering factors such as accreditation, specialization, success rates, and patient reviews
- Request and find detailed cost estimates, including room charges, procedure costs, and potential additional fees
- Verify insurance coverage, including network status of the hospital
- Schedule a consultation with a financial counsellor before admission, if available
- Consider seeking a second opinion for major procedures or treatments

3.2 Admission and Registration Process

Potential Errors:

- Providing incomplete or inaccurate personal information
- Misunderstanding of admission reason or planned procedures
- Not fully understanding the financial implications of the admission

- Misunderstanding of hospital rules and procedures

Actionable Points:

For Healthcare Providers:

- Implement comprehensive admission checklists
- Provide clear explanations of admission reasons and planned procedures
- Offer translation services if needed
- Provide a detailed financial counseling session, including an explanation of insurance coverage, expected out-of-pocket costs, and payment options
- Offer written estimates of expected costs and potential scenarios that could affect the final bill

For Patients and Caregivers:

- Bring all necessary identification and insurance documents
- Ask for clarification on admission reasons and expected length of stay
- Designate a family member or friend as a patient advocate
- Request a detailed breakdown of expected costs and review it thoroughly
- Choose the room category keeping in mind your finances and comfort
- Discuss payment plans or financial assistance options if needed
- Keep records of all financial discussions and agreements
- Understand your Rights and Responsibilities
- Understand the hospital's rules regarding visitors and home food

3.3 First Clinical Assessment and Treatment Planning

Potential Errors:

- Incomplete or inaccurate medical history
- Failure to disclose all current medications and allergies
- Not assessing the risk from disease or patient vulnerability
- Miscommunication about treatment plans and terms of consent form
- Multiple caregivers, lack of continuity of care

Actionable Points:

For Healthcare Providers:

- Conduct thorough initial assessments, including medical history, current medications, and allergies
- Assess patient's physical condition and ability to understand care instructions
- Develop and clearly communicate a comprehensive treatment plan
- Use teach-back methods to ensure patient understanding

For Patients and Caregivers:

- Provide a complete and accurate medical history
- Bring a list of all current medications, including over-the-counter drugs and supplements
- Disclose all known allergies and previous adverse reactions
- Ask questions about your diagnosis and treatment plan
- Understand risks, benefits and alternatives mentioned in consent form before signing
- Ensure you understand the proposed course of treatment and potential risks
- Identify (fix) caregiver - one or two people who can coordinate with treating team to avoid communication lapses

3.4 Room Assignment and Hospital Orientation

Potential Errors:

- Misunderstanding of hospital layout and available facilities
- Failure to use call buttons or other safety features properly
- Not understanding visitor policies or infection control measures

Actionable Points:

For Healthcare Providers:

- Provide comprehensive orientation to room features and hospital facilities
- Demonstrate proper use of bed controls, call buttons, general lighting and night lamps, grab bars and antiskid mats in bathrooms, slippery floors, surface cleaning of bed and table, and other safety devices
- Clearly explain visitor policies and outside food-flower and clothing prohibitions
- Emphasize surface cleaning, sanitization and infection control measures
- Offer orientation tours for patients and their caregivers
- Guidelines on Preventing falls in hospital

For Patients and Caregivers:

- Pay attention to and follow all hospital rules and staff instructions
- Familiarize yourself with room features and how to call for assistance
- Understand and adhere to visitor policies and infection control measures
- Ask questions if any instructions or policies are unclear

3.5 Medication Management and Reconciliation

Potential Errors:

- Medication mix-ups or dosage errors
- Adverse drug interactions
- Failure to report side effects
- Incomplete or inaccurate medication reconciliation

Actionable Points:

For Healthcare Providers:

- Implement barcode medication administration systems
- Perform thorough medication reconciliation at admission, transfers, and discharge
- Educate patients on each medication's purpose, dosage, and potential side effects
- Clearly explain any changes to the patient's pre-admission medication regimen

For Patients and Caregivers:

- Keep a personal medication list and share it with your care team
- Ask about the purpose and potential side effects of each medication
- Understand the revised comprehensive medication plan including supplements to be taken post-treatment
- Verify that you're receiving the correct medication before taking it
- Report any unusual symptoms or side effects immediately

3.6 Diagnostic Procedures and Treatments

Potential Errors:

- Miscommunication about procedure details or risks
- Failure to follow pre-procedure instructions
- Mix-ups in patient identification

Actionable Points:

For Healthcare Providers:

- Use clear, jargon-free language to explain procedures and treatments
- Implement robust patient identification protocols
- Provide written pre-procedure instructions and verify compliance
- Obtain informed consent for all procedures

For Patients and Caregivers:

- Ask questions about the purpose, risks, and benefits of all procedures
- Follow all pre-procedure instructions carefully
- Verify your identity and the procedure you're scheduled for with each staff member
- Speak up if something doesn't seem right

3.7 Surgery and Anaesthesia

Potential Errors:

- Wrong-site surgery
- Anesthesia complications due to undisclosed information
- Postoperative complications due to poor understanding of care instructions

Actionable Points:

For Healthcare Providers:

- Implement robust surgical site marking and verification procedures
- Conduct thorough pre-operative assessments and discussions
- Use teach-back methods to ensure patient understanding of post-op care
- Provide clear, written post-operative instructions

For Patients and Caregivers:

- Participate in surgical site marking and verification
- Disclose all medical history, including previous reactions to anaesthesia
- Ask questions to fully understand the procedure, risks, and recovery process
- Review and clarify post-operative care instructions before discharge

3.8 Daily Care and Monitoring

Potential Errors:

- Falls due to improper mobility assistance
- Development of pressure ulcers
- Failure to recognize early signs of complications

Actionable Points:

For Healthcare Providers:

- Implement regular rounding schedules
- Use fall risk assessment tools and prevention strategies
- Educate patients on the importance of early mobilization and position changes
- Encourage patients to report any new symptoms or concerns

For Patients and Caregivers:

- Use call buttons for assistance with mobility, to prevent falls
- Participate in daily hygiene and position changes
- Report any new pain, discomfort, or symptoms promptly
- Engage in prescribed physical therapy or mobility exercises

3.9 Discharge Planning and Execution

Potential Errors:

- Misunderstanding discharge instructions
- Failure to fill or properly take prescribed medications
- Missing follow-up appointments
- Confusion about medication changes made during hospitalization

Actionable Points:

For Healthcare Providers:

- Begin discharge planning early in the hospital stay
- Provide clear, written discharge instructions
- Use teach-back methods to ensure understanding of home care instructions
- Schedule follow-up appointments before discharge
- Conduct a thorough medication reconciliation, clearly explaining all medication changes

For Patients and Caregivers:

- Review and ask questions about discharge instructions
- Understand revised medication plan including supplements and earlier medicines learn how and when to take them
- Know the warning signs that should prompt a call to the doctor or a return to the hospital
- Fill all prescriptions promptly and set up a system for taking medications as prescribed
- Keep all follow-up appointments
- Share your updated medication list with your primary care provider and any specialists you see

3.10 Key Areas for Inpatient Education at All Stages

To empower patients during their hospital stay, education should focus on:

- Understanding patient rights and responsibilities in the hospital setting
- Effective communication with healthcare providers and care team members
- Medication safety and the importance of adhering to prescribed regimens
- Understanding the importance of medication reconciliation and how to participate in the process
- How to maintain an accurate, up-to-date personal medication list
- Infection prevention, including hand hygiene and visitor policies
- Fall prevention and safe mobility practices
- Recognition of emergency symptoms and how to alert staff
- The discharge process and post-hospital care requirements

4. Strategies for Effective Inpatient Engagement

- Implement Patient and Family Advisory Councils to gather insights and feedback
- Utilize multiple communication channels (verbal, written, digital) for patient education
- Encourage patients to maintain a personal health journal during their stay
- Provide access to educational resources through bedside tablets or TVs
- Offer language interpretation services and culturally appropriate education materials
- Implement shared decision-making tools for treatment plans

- Conduct daily patient-centered rounds that include patients and family members
- Implement a standardized medication reconciliation process that actively involves patients and caregivers
- Provide patients with medication tracking tools or apps to maintain accurate medication lists

Implementing a Culture of Safety in Inpatient Settings

- Foster open communication about safety concerns among staff, patients, and families
- Implement non-punitive error reporting systems to encourage transparency
- Regularly review and update safety protocols based on patient feedback and incident reports
- Provide ongoing training for staff on patient safety and engagement techniques
- Conduct regular safety audits and share results with staff and patients
- Celebrate safety achievements and share success stories
- Encourage patients to participate in safety initiatives, such as medication double-checks
- Establish a multidisciplinary team approach to medication reconciliation, involving physicians, nurses, and pharmacists
- Regularly audit medication reconciliation processes and use findings to improve systems

The above strategies provide a foundation for building a culture of safety that empowers patients and supports healthcare providers in delivering high-quality, safe care in hospital settings.

SECTION III:

Enhancing Healthcare Through Patient Feedback

The Importance of Patient Feedback

Patient feedback is essential as it provides direct insights into the quality of care from the patient's perspective, supporting patient-centered care models. It helps healthcare providers identify specific areas for improvement in service delivery, such as communication and facility management, which are often overlooked. Engaging patients in the feedback process empowers them and encourages a sense of ownership over their care. Regularly acting on feedback shows transparency and accountability, strengthening trust between patients and providers. Moreover, utilizing patient feedback can lead to improved patient outcomes and increased satisfaction.

Patient feedback encompasses both **active and passive feedback**. Active feedback is actively solicited from patients through surveys, interviews, or direct inquiries, whereas passive feedback is gathered indirectly from patient behaviours, complaints, online reviews, or social media interactions. Both types are crucial to obtaining a well-rounded understanding of patient experiences and identifying areas for improvement.

Challenges in Gathering Patient Feedback

Healthcare providers face several obstacles when collecting patient feedback:

- Fear of negative repercussions can deter patients from providing honest feedback.
- Concerns about confidentiality may make patients reluctant to share their true feelings.
- Limited time during or after a hospital stay reduces the likelihood of patients providing feedback.
- Difficulty in articulating experiences or concerns clearly.
- Feedback may be biased by patients' immediate health conditions or emotional states.
- Low response rates to traditional surveys limit the amount of feedback collected.
- Patients may view feedback mechanisms as ineffective or unresponsive, leading to disengagement.

- Healthcare staff may lack awareness of the importance of patient feedback, hindering collection efforts.
- Organizational processes may be insufficiently structured to facilitate effective feedback collection and analysis.
- Cultural barriers within healthcare organizations can create resistance to change based on patient feedback.
- Demographic challenges, such as literacy, language barriers, and socio-cultural factors, can limit feedback from diverse patient groups.

5. When to listen - What to Learn (See Annexure 1 - Touch Points in Care Pathway)

Every touch point is an **opportunity** to work with and alongside patients, by guiding them and listening to their perspectives.

When patients enter the hospital or care facility, they are more receptive to learning about their conditions and improvement in health. Moreover, the doctor's or hospital's word is taken with full trust and belief. This is an ideal opportunity to communicate.

- **Before Seeking the First Appointment and Prior to Doctor's Consultation**
 - Gather insights on patient expectations, concerns, and ease of accessing appointment information to improve the booking process and pre-consultation experience
- **Registration & Billing**
 - Collect feedback on the efficiency, clarity, and communication during registration and billing to identify areas for improvement
- **Navigation in Hospital**
 - Listen to feedback on signage clarity and ease of finding departments or facilities, and involve patients in designing better navigation aids.
- **OPD Consultation**
 - Gather feedback on waiting times, the consultation process, and communication with healthcare providers during daily interactions to capture immediate concerns.
- **Diagnostic Tests Followed by Consultation**
 - Monitor feedback on scheduling, comfort, and explanation of diagnostic procedures to ensure patient understanding and satisfaction.
- **Admission and Stay in Hospital (IP)**
 - Collect feedback on the admission process, comfort, quality of care, and patient understanding of treatment plans from arrival through discharge.
- **Insurance - TPA**

- Obtain feedback on the clarity and ease of insurance and TPA processes to identify gaps in communication and procedural clarity.
- **Pre & Post Surgery**
 - Gather detailed feedback on pre-surgery preparation, post-surgery recovery, and compliance with protocols to enhance patient experience and outcomes.
- **Discharge and Transition to Home Care**
 - Monitor feedback on the discharge process and patient understanding of medication, follow-up care, and home care plans.
 - Conduct follow-up calls: 2 days post-discharge by the treating team and 7-10 days later by a different team to address any ongoing concerns. Follow up further if issues persist.
- **Feedback**
 - Use surveys and feedback forms with specific, open-ended questions to capture detailed responses on all aspects of care.
 - Leverage technology to gather feedback from multiple sources, such as social media, review sites, and patient portals.
 - Empower healthcare staff with training to solicit and handle feedback effectively during patient interactions.

6. Strategies for Effective Feedback Collection

6.1 Creating a Trusting Environment

- Ensure confidentiality of feedback
- Encourage open communication
- Train staff in empathetic listening
- Foster an environment where patients feel comfortable expressing their concerns and opinions without fear of repercussions.
- Demonstrate a genuine commitment to acting on patient feedback to establish credibility in the feedback process.
- Communicate any changes made based on patient feedback to build trust and engagement.

6.2 Diversifying Feedback Methods

- Implement multiple feedback options (e.g., online surveys, anonymous forms, patient forums)
- Utilize technology (e.g. WhatsApp) to enable real-time feedback collection and enhance accessibility
- Offer multiple language options and Utilize diverse feedback channels to ensure inclusivity and accessibility for diverse patient populations.
- Establish counseling rooms or kiosks for in-person feedback

- Create a **Caregivers Fatigue Forum** for caregivers to share their experiences and concerns, involving nurses and support staff for additional insights.

6.3 Timing of Feedback Collection

- Engage patients throughout their healthcare journey
- Conduct post-discharge follow-ups (2 days and 7-10 days after discharge)
- Implement daily mood checks during hospital stays to monitor patient experiences in real time and address concerns promptly.
- Provide patients with multiple opportunities to give feedback at different stages of their care to ensure that their voices are heard.

6.4 Patient Advisory Councils (PACs) as a Strategy for 2 way Communication

PAC is a platform for patients to share experiences and influence decision-making by building sustainable partnerships with healthcare providers to *identify* common concerns and find appropriate solutions.

Objectives of PAC -

- Foster strong communication and trust between healthcare providers and patients.
- Use patient insights to tailor services, enhance clinical outcomes, and improve patient experience.
- Involve patients to better prevent adverse events, medical errors, and potential harm.
- Identify effective ways to educate patients and key topics to enhance safety and reduce harm.

Establishing PAC:

- Step 1 - Form a core group to discuss and present PAC benefits to management.
- Step 2 - Mobilize core group and draft vision, mission, goals and bylaws of PAC
- Step 3 - Determine ideal PAC Composition, ensuring a diverse mix of Patients, Family members, healthcare providers and hospital administration.
- Step 4 - Selection of Leadership, HCP Representative and Patient Representative
- Step 5 - Draft PAC charter that delineates PAC's purpose, goals, member roles, functioning and administration
- Step 6 - Launch PAC by Training & Orientation of members, identify key areas of improvement
- Step 7 - Organize regular PAC meetings and share progress with all stakeholders
- Step 8 - Share solutions with healthcare providers as well as patients, Celebrate Success

6.5 Leveraging Various Feedback Sources

- Seek knowledge from other existing patient forums
- Create patient/ caregiver support groups
- Collaborate with NGOs for insights into specific conditions
- Develop patient portals for experience-sharing

7. Tools and Techniques for Gathering Patient Experience

7.1 Traditional Methods

- **Electronic and Paper-Based Surveys:** Utilize standard surveys to collect structured feedback from patients.
- **Net Promoter Score (NPS):** Measure patient loyalty by asking how likely they are to recommend the hospital to others.
- **Feedback Channels:** Offer diverse feedback methods such as Google Forms, apps, links, hard copies, and audio recordings to ensure all patients can provide input.

7.2 Advanced Techniques

- **Patient Reported Experience Measures (PREM):** Use tools to capture patient experiences directly related to their care.
- **Patient Reported Outcome Measures (PROM):** Gather data on patient health outcomes from the patient's perspective.
- **Social Media and Review Site Monitoring:** Monitor online platforms to receive real-time feedback.
- **CAHO Friend Program:** Engage impartial representatives (not part of the treating team) to collect honest feedback.
- **Top Management and CEO Involvement:** Ensure active participation of the CEO and senior management in reviewing PREM and PROM results, reinforcing a commitment to patient-centered care.
- **Caregivers Forum:** Create forums to capture the experiences and perspectives of patients' families and caregivers.

7.3 Other Tools and Strategies for Improving Patient Feedback

- **Mood-o-Meter:** Implement daily mood checks to gauge patient concerns and satisfaction, allowing for real-time interventions.
- **Chatbots:** Provide feedback options via chatbots for patients who may not have access to phones, ensuring inclusivity.
- **Innovation through Patient Learning (IPL):** Encourage staff to gather and analyze real patient experiences, identify problem areas, and develop innovative solutions. Reward staff for effective ideas.
- **Grievance Cells for Anonymous Feedback:** Establish dedicated cells to allow patients to provide anonymous feedback safely.

- **Counseling Rooms or Kiosks:** Set up spaces where patients and families can provide feedback in a confidential environment at all times.
- **Patient Support Groups:** Collaborate with NGOs to gather insights from patients with special diseases and conditions, enhancing the understanding of unique patient needs.
- **Patient Portals:** Develop hospital-specific portals, such as 'Patients Like Me,' to facilitate experience sharing and build a community of patient support.

8. Utilizing Feedback for Continuous Improvement

Widen horizon of taking patient feedback beyond hospital arena. Check patient welfare 2 months, 6 months or a year later after full treatment and recovery to understand what went right and what went wrong.

8.1 Analysis and Trend Identification

- **Identify Improvement Areas:** Pinpoint specific services needing enhancement to better meet patient needs and improve care quality.
- **Gather Comprehensive Input:** Collect feedback throughout the patient journey at various hospital touchpoints to obtain a holistic view of the patient experience.
- **Identify Trends:** Focus on identifying recurring themes and specific areas for improvement rather than relying solely on aggregate scores.

8.2 Project Planning

- **Developing Targeted Improvement Initiatives:** Use feedback data to create targeted initiatives that address identified issues.
- **Evaluate Initiatives:** Regularly assess the effectiveness of initiatives aimed at improving patient experience and safety.
- **Involve Patients in Design:** Include patients in designing navigation signages and the location of facilities, as they are the primary navigators within the hospital environment.

8.3 Staff Training and Development

- **Staff Training:** Train healthcare staff to implement the latest insights from patient experiences and relevant research projects, ensuring sustainable improvements.
- **Encourage and Reward Innovation:** Encourage staff to develop innovative solutions and reward those who contribute significantly to improving patient care.

8.4 Communication and Transparency

- **Inform Patients About Changes:** Clearly communicate to patients any changes made based on their feedback to enhance trust and engagement.
- **Regular Updates to Staff:** Keep healthcare staff regularly updated on ongoing and planned improvement initiatives to foster a culture of continuous improvement.

8.5 Measuring the Impact of Feedback-Driven Improvements

- Establish key performance indicators (KPIs) related to patient experience
- Regularly assess the effectiveness of implemented changes
- Conduct comparative analysis of pre-and post-implementation data
- Train staff on interpreting feedback to enhance contributions to quality initiatives.
- Continuously assess changes to remain responsive to evolving patient needs.
- Use external benchmarks and accreditation to enhance feedback system credibility.
- View patient feedback as a learning tool to identify issues and improvement opportunities.

SECTION IV:

9. Way Forward

9.1 Communication Opportunities in Care Pathway - Effective communication throughout the patient care pathway is crucial for identifying potential errors at each touchpoint, mitigating risks, and ensuring patient engagement and safety. By providing clear guidelines and support, both healthcare providers and patients can make informed decisions, enhancing overall care quality and outcomes. (See Annexure 1 - Touch Points in Care Pathway)

9.2 Driving Patient Safety through Patient Education

The **Patients for Patient Safety Foundation (PFPSF)**, an initiative promoted by **CAHO**, plays a pivotal role in helping healthcare providers engage effectively with patients to reduce medical harm. It provides reliable, well-researched content aggregated from renowned global sources, validated by subject matter experts, and tailored to the Indian context. PFPSF enhances patient safety through the entire patient journey before they fall sick, during treatment and post-care stages. This material is available at www.patientsforpatientsafety.in.

Healthcare providers can greatly benefit from collaborating with PFPSF by utilizing its pre-made content to foster patient education and engagement. This partnership allows providers to leverage PFPSF's expertise in creating patient Education material from patient's perspective, leading to early detection, timely treatment, prevention and protection against medical harm resulting in better healthcare outcomes. By integrating PFPSF's resources into your practice, healthcare providers can effectively engage with patients to build a culture of safety.

(See Annexure 2 - Illustrative List of Patient Education Topics)

9.3 Enablers in Hospital Settings - Effective patient communication and involvement can be enhanced through multiple tools and formats, including face-to-face interactions, visual displays, informational handouts, and staff training, utilizing various hospital spaces to ensure widespread access and understanding. (See Appendix 1- Enablers in Hospital Settings)

9.4 Enablers For Patients and Caregivers - Choosing the right hospital and consultant, understanding financial implications, and managing medications effectively are crucial for patients and caregivers. This guidance ensures informed decisions, minimizes risks, and enhances safety, leading to improved care outcomes and a better healthcare experience.
(See Appendix 2 - Enablers for Patients and Caregivers)

10. Conclusion

Enhancing patient safety requires a collaborative effort between healthcare providers, patients, and their families. By focusing on effective communication, patient-focused education, and active engagement throughout the touchpoints of the patient journey, we can significantly reduce the risk of medical errors and improve overall healthcare outcomes. This paper offers a template for effective patient engagement which can be used directly or with modification to suit the healthcare organization

In this context, patient feedback becomes an invaluable resource for healthcare providers striving to improve their services and outcomes. By implementing a comprehensive strategy for collecting, analyzing, and acting upon patient experiences, healthcare organizations can foster a culture of continuous improvement, enhance patient satisfaction, and ultimately deliver higher-quality care.

TOUCH POINTS IN CARE PATHWAY

Annexure 1

S.No.	Patient Journey Touchpoint	For HCP To Do	For Patients To Do	Mistakes by patients
1.	Planning Before the First Appointment Emergency Visit Unplanned - Walk-in visit	<ul style="list-style-type: none"> - Provide access to the hospital website - Inform what to bring like Aadhar card, previous prescriptions, test reports, insurance policies - Recommend consultant to meet - Ensure patient brings an attendant - Ensure signages are displayed in both national or regional languages with special emphasis on emergency gate and front gate - Inform walk-in patients about the sequence and wait time - Ensure doctor's punctuality for OPD appointments 	<ul style="list-style-type: none"> - Share name, phone, address, symptoms, earlier reports of medication and prescriptions, allergies, family history, current problems - Bring along a Caregiver - Check hospital empanelment - Use EMERGENCY entrance for emergency conditions only 	<ul style="list-style-type: none"> - Inaccurate personal details - Missing documents - Incomplete history - Unclear Insurance cover/payment options - Goes to the wrong gate, emergency for OPD
2.	Registration and Billing - Front Desk Consultation and Payments	<ul style="list-style-type: none"> - Collect Patient information forms and demographics, contact details, correct spelling of names, phone no. and email ID for further correspondence - Explain costs and billing structure - Issue UHID - Explain insurance, coverage and hospital empanelment for insurance - Guidance on which doctor to consult - based on 	<ul style="list-style-type: none"> - Bring necessary details and fill forms correctly - Use UHID, if you have - Register the legal email/ phone identity for getting confidential reports - Check insurance privileges, may need cash - Provide accurate symptoms - Come early to complete - Come early before appointment time to 	<ul style="list-style-type: none"> - Incorrect date of birth, incorrect email/ phone number, spelling mistakes in name, or address - Not carrying ID/ Insurance details - Wrong or inaccurate or incomplete information about symptoms, history; allergies

S.No.	Patient Journey Touchpoint	For HCP To Do	For Patients To Do	Mistakes by patients
		conditions expressed by patients - Inform about Payments for consultation - Inform location of separate multiple billing desk - Display the scope of services with accurate signages - Train staff to ask probing questions about medical history	complete pre-consultation process	
3.	Navigation to OPD, Way Finding Wait for your turn	- Provide Customer relationship officers or front desk staff should direct patients to relevant consultants - Provide OPD token for queue - Install easy-to-understand internal directions and clear signages in adequate and multi-lingual language - Share patient-centric information in the consulting rooms - Implement a system to update patients on wait times	- Wait patiently for your turn, especially for walk-in patients - Arrange test reports, prescriptions, and medicine lists, (documents) in order - Prepare your questions, doubts, symptoms, - Punctuality for appointments, follow the line - Ask for directions if unsure - Use waiting time to organize documents and prepare questions	- Waiting in wrong place - Late for appointment - Not asking for signages - Not bringing previous reports
4.	At OPD Consultation with Specialized doctor	- Provide clear medicine prescription with information on timing and route of ingestion - Advise additional diagnostic tests, if necessary	- Ask questions, understand disease, prognosis, time, costs and other precautions - Ask about symptoms to watch for	- Lack of involvement, ignorance, not bothered - Not convinced about treatment

S.No.	Patient Journey Touchpoint	For HCP To Do	For Patients To Do	Mistakes by patients
	<ul style="list-style-type: none"> -Visiting Consultant- Duty doctor - Multiple Consultants Nurses Pre-consultation -After Consultation 	<ul style="list-style-type: none"> - Assist with admission for treatment or invasive procedures - Follow-up consultation appointment to be given on the same day - Advise another specialist review - explains days/ timings of visiting consultants - Explain Lead consultant in case of multiple specialists - Offer second opinion for Serious patients and interventions - Explain diagnosis, treatment plan, precautions and care at home - Explain consent form - risks, benefits and alternatives - Avoid delays in attending to OPD patients as it can worsen patients's condition - Use patient-friendly language and visual aids - Encourage questions and provide time for patient comprehension - Offer written summaries of key points discussed 	<ul style="list-style-type: none"> - Understand the Consent Form- what it entails in risks, benefits and advantages, alternatives - Inform about medications, current supplements, any other conditions - Ask about alternative treatment plans - Take Second Opinion - Book follow-up appointment (7 days for free window usually available) - Take notes during the consultation - Make my health diary carry all your notes in the same diary (it can be digital also) 	<ul style="list-style-type: none"> - Not following protocol, diagnostic tests - Not aware of follow-up window - Change doctor or facility, Incomplete information, no follow through, patient condition worsens during this transition - Incomplete information of other conditions - Misunderstanding diagnosis, test reports or treatment plans
5.	Diagnostic tests	<ul style="list-style-type: none"> - Provide clear written instructions and for preparation such as fasting, precautions, etc 	<ul style="list-style-type: none"> - Undergo all the prescribed tests - Bring a Caregiver 	<ul style="list-style-type: none"> - Not following instructions - Not doing all the tests

S.No.	Patient Journey Touchpoint	For HCP To Do	For Patients To Do	Mistakes by patients
		<ul style="list-style-type: none"> - Explain test turnaround time and costs - Give patient physical/digital report - Obtain informed consent for invasive procedures, explain consent form, risks, benefits, alternative and prior preparations - Follow up on incomplete or missed tests 	<ul style="list-style-type: none"> - Check correct name/ ID in test report - Use Accredited labs - Send report to doctor for review - Ensure prior preparation in accordance with instructions - Ask about the purpose and expected results of each test 	<ul style="list-style-type: none"> - Not collecting reports - Self-medication based on reports - Not consulting doctors with reports
6.	Consultation post-diagnostic tests	<ul style="list-style-type: none"> - Explain diagnosis - Explain treatment options - Recommend optimum treatment plan including precautions - Ensure continuity of care through same physician, in case the doctor is on leave then a replacement physician should be in place 	<ul style="list-style-type: none"> - Follow Treatment - Understand implications including costs - Take Second Opinion if doubts 	<ul style="list-style-type: none"> - Non-compliance with treatment plan - Do not undertake tests - Do not get admitted - Miss doc/ hospital reviews and self-medication
7.	Admission IP - desk is separate	<ul style="list-style-type: none"> - Assist in filling out forms with more patient details, plus attendant details - Explain room tariff and doctor fees - Discuss estimated duration of stay - Guidance on Full or advance payment if without insurance - Explain Consent Form details, stay duration, 	<ul style="list-style-type: none"> - Choose room as per budget - Understand total cost, your insurance allowance and method, coverage limits, and co-payment clauses - Consent issues should be understood - R and R should be understood and followed 	<ul style="list-style-type: none"> - Ignorance about costs leads to dispute - Not carrying an insurance policy and ID card - Variation in estimate and actual payable amount not provided for - Mismanaging personal medications

S.No.	Patient Journey Touchpoint	For HCP To Do	For Patients To Do	Mistakes by patients
		payments, reuse of devices, risks, benefits, alternatives - Ensure Patient Rights and Responsibilities are verbally explained and copy given - Use patient-friendly language - Provide comprehensive orientation to inpatient facilities and procedures - Implement robust systems for tracking patient allergies and dietary needs - Conduct thorough medication reconciliation upon admission		
8.	Insurance - TPA separate desk	Assist in filling forms for claim, pre-sanction, maybe reimbursement or cashless,	- Understand limits of eligibility, and provide documents in advance	- Non-conformance to rules of insurance - Not verifying Validity of policy and timely renewal - Chronic conditions may get covered after a delay period
9.	Admit to Ward/ Room by IP desk people, then Nurse takes over	- Inform about room orientation, bed, water, bathroom, fire, call bell, schedule of nurses, doctors schedule, housekeeping cleaning, patient etiquettes, etc - Provide a list of required tests	- Understand and follow guidelines, R and R, etiquettes, follow instructions for diet, medicines tests, rest, exercise, etc - Understand Treatment protocols - Separate billing for attendant food	- Eating outside food, not taking medicine, getting up from bed improperly leading to falls - Misbehave with clinical staff and other patients - Not taking care/ of hospital property

S.No.	Patient Journey Touchpoint	For HCP To Do	For Patients To Do	Mistakes by patients
		<ul style="list-style-type: none"> - Ensure Consent is taken for tests with risk profile, verbally as well as in writing - Inform about no. of visitors and timings of visits - Explain about food and stay provision for patient and attendant *Attendants of ICU patients do not have access to room or bed 	<ul style="list-style-type: none"> - Follow visitors policies - Visitors, number, timings 	
10.	For Surgery Pre-Anaesthesia check-up	<ul style="list-style-type: none"> - Ensure Consent form is taken, and tests done for anesthesia checkups, - Explain Possible risks and complications - Explain Risk of procedure linked to co-morbidities High Risk Consent - Check allergies - Conduct thorough pre-operative assessments and discussions - Use teach-back methods to ensure patient understanding 	<ul style="list-style-type: none"> - Follow pre-surgery orders completely - Undergo the pre-anaesthesia check-up - Give accurate information about earlier episodes/ allergies/ current medicine/ current condition and co-morbidities - Choose procedure if option available - Check consent form, Risks, benefits and alternatives - Inform about all allergies and co-morbidities in family 	<ul style="list-style-type: none"> - Do not Inform about allergies or any previous problems or history of anaesthesia - Do not Understand risks - Misunderstanding the risks and benefits of procedures
11.	Surgery	<ul style="list-style-type: none"> - Explain pre and post-surgery requirements, - Verify Surgical site marking and Patient ID 	<ul style="list-style-type: none"> - Reconfirm the surgical marking site and patient ID - Understand attendant's policies - Attendants are 	<ul style="list-style-type: none"> - Not following pre-surgery instructions - Not following post-surgery instructions

S.No.	Patient Journey Touchpoint	For HCP To Do	For Patients To Do	Mistakes by patients
		<ul style="list-style-type: none"> - Explain time and duration for surgery, stay in recovery room and ICU - Take Consent at all stages - Impart information about the patient during, and after surgery to family/caregivers - Identify single caregiver for imparting patients <i>Important for multiple doctors</i> <ul style="list-style-type: none"> - Shifting of patient to high level of care, transfer of care setting – related decision taking with family 	<ul style="list-style-type: none"> not allowed to stay in or retain the room, - Use ICU Waiting area, do not enter ICU, - Ask and Attend Patient and family debriefing time for information about the patient - Ask for multi-disciplinary treating doctors - Be available to make decisions about shifting to high level of care or different procedures, or change of care settings 	<ul style="list-style-type: none"> in hospitals and at home - Ignoring Infection control - Multiple caregivers, information is missed - Do not have one family member to coordinate
12.	Discharge Process - discharge, billing and clearance of medicine stock or other devices, Transition to Home Care	<ul style="list-style-type: none"> - Explain medicines, diet, rehab therapies, exercise, lifestyle changes, - Finalize billing and return of extra medicines (medicine reconciliation) - Help in Gathering reports - Explain 2 days in advance about medication management at home, wound care, medication, device management mental sensorium (<i>falls</i>) - Provide Checklist of precautions at home - Explain Emergency follow-up protocols - Inform charges for time of discharge for room rent 	<ul style="list-style-type: none"> - Understand continuing treatment at home, medication management, and diet and rehab therapies exercise, - Gather all records of reports or prescriptions - Pay bills via insurance or self - Learn to monitor vitals and devices at home - Buy medicines/supplies before leaving - Collect certificates of sick leave at time of discharge - Follow-up consultations with test reports 	<ul style="list-style-type: none"> - Not following instructions for medicines, diet, exercise, monitoring vitals - Not informing early alarm signals in time - Not completing treatment, missing follow-up - Infection in wounds and secondary problems - Last-minute rush at discharge time is not conducive to learning or remembering continuity of care instructions

S.No.	Patient Journey Touchpoint	For HCP To Do	For Patients To Do	Mistakes by patients
		- Mode of transportation from hospital to home - Give all reports - Create and give patient checklist before discharge - Use teach-back methods to ensure understanding of home care instructions - Schedule follow-up appointments before discharge	- Monitor for signs of complications	- Do not Collect all items needed for insurance - Misunderstanding discharge instructions
13.	Follow-up After Discharge, Home care, Feedback	- Check health condition of patient on phone, call F2F if problems happen, and Discuss issues; if any - Revise treatment plans if necessary - Take patient feedback - Reminder for follow-up appointment	- Book follow up appoint in advance - Attend Follow-up consultation with diagnostic tests and earlier reports, explain progress and concerns if any - Give honest feedback and share your patient experience - Inform earlier than appointments if any issues - Ask Questions at every stage	- Not being vigilant about any alarming signs and symptoms, report to doctor immediately - Not doing follow-ups - Not sharing patient experiences

Mistakes that Patients make at Home -

- Ignoring Symptoms
- Self-Medications
- Coming to an ill-equipped hospital/ competent physicians or specialization
- Buying medicines from unknown sources (cheaper but could be spurious)
- Lack of hygiene, neglecting wound care leading to infection buildup and secondary problems,

- Incorrect medicine intake, overdose or underdose,
- No exercise and rehab services, poor food
- Lack of monitoring of vitals at home
- Not retaining documents of doctor/ hospital /episode and earlier ones in chronological order

Mistakes Patients make in Hospital -

- Pre-discharge Medication Reconciliation at First Consultation, and at Discharge
- Consuming food from home which is not allowed,
- Poor lighting in room, not waking up caregiver while getting up from bed or going to bathroom
- Falls is a big problem
- Incomplete or inaccurate information about history, symptoms, alternate medicines, family history, earlier episodes
- Not being vigilant and alert - entirely depending on hospital staff
- Being rude to staff
- Too many visitors - risks of infections; disturbing patients

ILLUSTRATIVE LIST OF PATIENT EDUCATION TOPICS

Annexure 2

S.No.	List of Topics (Developed by Patients for Patient Safety Foundation) Available at www.patientsforpatientsafety.in
	INTRODUCTION TO PATIENT SAFETY
1	Avoid Medical Harm (Introducing medical harm & patient safety)
2	Errors that Patients Make (How patients can Avoid harm)
	MEDICATION SAFETY
3	Understanding Medication Safety (What is Medication Safety)
4	Keeping medication safe at home
5	Managing Medicines While Traveling
6	Beware of Spurious drugs
	PATIENTS RIGHTS & RESPONSIBILITIES
7	Patient Rights
8	Patient Role & Responsibility
9	Role of a Caregiver

S.No.	List of Topics (Developed by Patients for Patient Safety Foundation) Available at www.patientsforpatientsafety.in
	COMMUNICATION WITH DOCTOR
10	Preparing for a Visit to the Doctor
11	Preventing Errors in Diagnosis
	PREVENTING FALLS
12	Preventing falls in Hospitals
13	Preventing Falls at Home
	PREVENTING INFECTIONS & VACCINATION
14	Controlling Infection with Hand Hygiene
15	Necessity of Adult Vaccination
	ACCREDITATION
16	Selecting the Right Hospital - Importance of Accreditation
	AGEING
17	Common health-related problems among the elderly
18	Medication management for the elderly
19	Palliative home care
20	Elderly care
	FIRST AID RESPONSE
21	First Aid Kit
22	Heat Stroke - Symptoms & Treatment

S.No.	List of Topics (Developed by Patients for Patient Safety Foundation) Available at www.patientsforpatientsafety.in
	GENERAL HEALTH LITERACY
23	Understanding Discharge Summary
24	How to Monitor BP at Home
25	What Are Imaging Tests: An Introduction
26	MRI Test - What You Should Know
27	CT Scan - What You Should Know
28	X-ray - What You Should Know
29	Ultrasound - What You Should Know
	WOMEN'S HEALTH
30	Anaemia in Women: Prevention, Symptoms, Test, and Treatment
31	Osteoporosis- Prevention symptoms, test and treatment
	NON-COMMUNICABLE DISEASES
32	Stroke: How to Detect and Respond
33	Heart Attack: How to Detect and Respond
34	Seizure: How to Detect and Respond
35	High Cholesterol
36	Hypertension
37	Diabetes
38	Thyroid

S.No.	List of Topics (Developed by Patients for Patient Safety Foundation) Available at www.patientsforpatientsafety.in
39	Post hospitalization home care
	EYE CARE
40	Common eye problems
41	Good habits for better eyesight
	ORAL HEALTH
42	Common dental problem
43	Oral hygiene
44	Mouth Ulcer
	DIALYSIS
45	Dialysis: Types, Risks and Safety Precautions- Website article
	POSTURE RELATED
46	Our Posture Matters

APPENDICES

Appendix 1: Enablers in Hospital Settings:

There are several tools and enablers to increase and improve communication and involvement.

Use multiple locations and formats of communicating to ensure impact:

- **Face to Face, Verbal** explanation by treating professionals as well as service/paramedic staff at every stage. Use local language, simple non-technical words

- **Display** Posters or Charts on Walls or Standees - at prominent points of display by showing relevant information (eg. How to check blood sugar can be displayed in diabetes OPD)
- **TV screens** can carry graphical information, posters, short videos, and silent videos in canteens, OPD, waiting areas, pharmacies, in-room diagnostic labs, etc
- **Handouts** and patient information brochures at the front desk, admission, or with discharge papers
- **Enable staff** to be effective communicators through staff training. Ensure they have patient education material readily available. Every person who is serving directly or indirectly should be trained.
- **Intra Communication** between care providers (doctor, nurse, others)
- **Locations:** Utilize various spaces within the hospital, such as lobbies, front desks, admission and discharge areas, waiting areas, canteens, pharmacies, diagnostic labs, wards, ICU waiting areas, and OPD for each department, to display patient education materials.

Appendix 2: Enablers For Patients and Caregivers

2A: Factors to Consider When Choosing a Hospital

- Specialization and expertise in your specific condition
- Success rates for relevant procedures
- Patient satisfaction scores and reviews
- Accreditation status and quality ratings
- Availability of necessary technology and equipment
- Proximity to your home and support network
- In-network status with your insurance provider

2B: Questions to Ask When Selecting a Consultant

- What is your experience with my specific condition?
- What are your success rates for the proposed treatment?
- Are you board-certified in the relevant speciality?
- Do you have privileges at my preferred hospital?
- How do you handle after-hours care or emergencies?
- Are you in-network with my insurance provider?

2C: Understanding Financial Implications

- Request a detailed, itemized estimate of all expected costs
- Understand which services are covered by your insurance and which are not
- Ask about the hospital's policy for unexpected complications or extended stays
- Inquire about bundled pricing options for your procedure or treatment
- Discuss payment plan options and any available financial assistance programs
- Understand the billing process and timeline

- Keep records of all financial discussions and agreements
- Ask about medication costs, especially for new prescriptions, and inquire about generic alternatives if cost is a concern
- Understand your insurance coverage for prescriptions, including any restrictions or prior authorization requirements

2D: Medication Reconciliation Checklist

When admitted to the hospital:

- Provide a complete list of all medications you're currently taking
- Include over-the-counter drugs, vitamins, and supplements
- Mention any recent changes to your medication regimen
- Inform staff about any drug allergies or previous adverse reactions

During your hospital stay:

- Ask about the purpose of any new medications
- Report any side effects or concerns promptly
- Keep track of any changes to your usual medication routine

Before discharge:

- Review your discharge medication list with your healthcare provider
- Understand why any medications have been added, changed, or discontinued
- Ask about the potential side effects of new medications
- Ensure you know how to obtain any new prescriptions
- Understand how new medications may interact with your existing medications
- Ask for a written schedule if your medication routine is complex

After discharge:

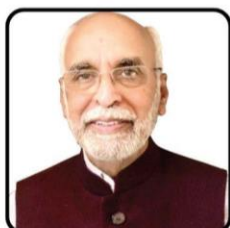
- Update your personal medication list with any changes
- Inform your primary care provider and any specialists about medication changes
- Monitor for any unexpected side effects or interactions
- Attend all follow-up appointments to review your medication regimen

References

- **Agency for Healthcare Research and Quality. (2023).** Guide to Patient and Family Engagement in Hospital Quality and Safety.
- **American Hospital Association. (2024).** Strategies for Improving Patient Safety in Hospitals.
- **American Medical Association. (2023).** Improving Patient Safety in Ambulatory Care Settings.

- **BMC Health Services Research. (2020).** Patient feedback to improve quality of patient-centered care in public hospitals: a systematic review of the evidence.
- **Centers for Medicare & Medicaid Services. (2023).** Hospital Compare: Quality of Care.
- **Consortium of Accredited Healthcare Organization (CAHO). (2024).** How to Reach Patients: Engaging Patients for Safer Healthcare.
- **Institute for Healthcare Improvement. (2022).** Patient Safety Essentials Toolkit.
- **Institute of Medicine. (2001).** Crossing the Quality Chasm: A New Health System for the 21st Century.
- **Joint Commission. (2023).** Speak Up™ for Patient Safety.
- **National Library of Medicines. (2020).** Using patient feedback to drive quality improvement in hospitals: a qualitative study.
- **National Patient Safety Foundation. (2022).** Free from Harm: Accelerating Patient Safety Improvement Fifteen Years after To Err Is Human.
- **National Patient Safety Foundation. (2022).** Outpatient Safety: A Growing Concern.
- **Patient-Centered Outcomes Research Institute. (2024).** Engaging Patients in Outpatient Safety Initiatives.
- **SmartSurvey Blog. (2023).** Patient Feedback: How It Can Improve Healthcare Experiences.
- **World Health Organization. (2021).** Patient Safety Fact File.

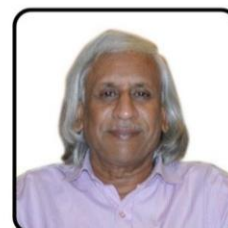
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Patients for Patient Safety Foundation - www.patientsforpatientsafety.in
My Health, My Responsibility

Engaging Patients To Enhance Patient Safety: A Comprehensive Approach For Healthcare Providers serves as a vital resource for healthcare providers aiming to strengthen patient safety through effective patient engagement. Developed by the **Consortium of Accredited Healthcare Organizations (CAHO)** and **Patients for Patient Safety Foundation (PFPSF)**, it outlines practical strategies and actionable steps to foster a culture of safety that actively engages patients and caregivers throughout their care journey.

This can be used by healthcare providers in all clinical and diagnostic settings to improve patient outcomes, reduce medical errors, and build trustful partnerships with patients. These actionable strategies can be modified to suit the size, specialities and local needs of the healthcare organization.

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Together, let's build safer healthcare for all