



Engaging Patients in Quality Assurance and Performance Improvement (QAPI)

The Network encourages facilities to engage patients beyond just patient care, to include their patient voices in quality improvement and governance activities. Bringing a patient perspective to the process can help the facility to better understand issues patients may be experiencing, and in developing patient-centered interventions.

Facilities often say they are concerned that having a patient in a QAPI meeting will violate confidentiality. To preserve confidentiality, plan the agenda for the meeting so the patient representative is at the beginning of the meeting. Then, confidential topics can be discussed after the patient has left the meeting.

Benefits of Patient Engagement in QAPI and/or Governance

Benefits of engaging patients in quality improvement activities include:

- Diverse perspectives and ideas can result in solutions that appeal to a wider population. Having that patient and/or family member involved can give you another perspective to incorporate into your interventions.
- Patients are in a position that allows for the repetitive observation of most initiatives and can report back on what they are seeing. By nature of the treatment, patients spend several hours, three days a week in the dialysis facility. They are watching and listening to what is happening around them and they can share what they are observing.
- Inclusion in the team can dramatically open up a patient perspective and demonstrate the dialysis facility's commitment to solving the problem. The patient can go back and share with other patients that the facility is committed to making improvements and they see first-hand the "bigger" picture of what the facility does to not just improve their care but care for all.

Steps to Engaging a Patient in QAPI

The process of engaging your patients into the QAPI (or Governing Body) meetings can be broken down into several parts: selecting and inviting, meeting, and sharing after the meeting.

Patient Selection

Patient selection should be considered with some thought and method behind it. Look for a person who:

- Can see beyond their personal experiences
- Shows concern for more than one issue
- Has a positive outlook on life

- Listens well
- Shows respect for perspective of others
- Interacts with different people
- Speaks comfortably in a group with candor

Patient Invitation

There are several key components to successfully inviting a patient to participate:

- Make it personal—invite the patient in-person away from other patients.
- Explain the purpose of the meeting.
- Share reasons why the patient is being invited.
- Review their role during and after the meeting.
- Accommodate the patient’s schedule to attend the meeting.
- If the patient agrees, educate the patient on the topic(s) covered and answer any questions they have.

Before the Meeting

- Remove any Personal Health Information from reports.
- Provide the patient with any policy and procedures that may be relevant to the discussion.
- Determine with the team what areas you would like patient input on or if the patient will participate in the entire meeting.
- Interdisciplinary team members should all prepare specific, directed questions for the patient.
- Ask the patient how long they would like to stay during the meeting.
- Set an agenda
 - Include introductions as part of the agenda.
 - Plan for the first 20-30 minutes to discuss the topics that are a priority for patient input.
 - Provide the patient with a copy of the agenda prior to the meeting.

During the Meeting

- Introduce all members attending by name and role.
- Ask the patient to introduce him/herself.
- Observe confidentiality requirements.
- Keep to the agenda, observing time limits set, to ensure patient feedback is included.
- Use plain language and explain any acronyms when reviewing reports and data.
- Ask the patient the prepared questions and about their experience with the topic, for example: “We have just reviewed the data we have on blood stream infections...
 - Have you ever had an infection since starting dialysis?
 - What steps do you take personally to help you stay infection free?
 - How do you think we could help patients with this?
 - How do you think staff could improve their practices?

After the Meeting

Facility staff:

- Include patient’s attendance and participation in QAPI or Governing Body Committee meeting minutes.
- Follow up with the patient directly on any hot-topic issues prior to the next meeting.
- Check in with team about what can be done to improve the process for the next meeting.

Patient:

- Update patients on the topics discussed.
- Ask for any feedback needed to share at the next meeting.

References

- Dialysis Patient Grievance Toolkit, Kidney Patient Advisory Council, the National Forum of ESRD Networks (2016)
- Institute for Patient- and Family- Centered Care. *Advancing the Practice of Patient- and Family-Centered Care in Hospitals-How to Get Started*
- Institute for Patient- and Family- Centered Care. *Advancing the Practice of Patient- and Family-Centered Care In Primary Care and Other Ambulatory Settings*