

# Patient engagement with psychological safety

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## ABSTRACT

Psychological safety is a multidimensional, dynamic phenomenon that concerns team members' perception of whether it is safe to take interpersonal risks at work. It is particularly important within health care teams who need to work interdependently to coordinate safe patient care within a highly complex, variable and high-stakes work environment. High levels of psychological safety have clear benefits for patient safety by improving the delivery of clinical care and promoting health care providers' job satisfaction and well-being. Feeling psychologically safe can enable team members to engage in speaking up behavior, such as asking questions, pointing out mistakes, or reporting errors. Several studies have explored psychological safety in health care teams and its impact on patient safety. These studies have highlighted the importance of psychological safety in health care organizations and provided strategies for promoting psychological safety. Psychological safety in health care involvement with patients can improve patient engagement.

## 1. Background

Medical errors are preventable errors or mistakes that occur in the process of delivering health care [1–4]. They can range from minor to more serious errors that may result in significant adverse events for patients. Common types of medical errors involve medication, diagnose, surgical procedures, communication, and medical records. Medical errors can have a variety of causes, such as poor communication between health care workers and patients, inadequate training, lack of oversight of certain medical processes, and fatigue [3–5]. To reduce medical errors, health care organizations should focus on improving communication and training, strengthening oversight, and encouraging patient engagement. Psychological safety is defined as a shared belief that individuals within a team or group are able to take risks without fear of being embarrassed or punished [6,7]. Psychological safety consists of an environment in which people feel respected and comfortable speaking up and expressing their ideas, opinions, and concerns. It is essential for effective communication and collaboration and encourages creativity and innovation.

## 2. Effectiveness of psychological safety

Edmondson is a renowned scholar and professor who is known for her work on psychological safety. She has highlighted the importance of leaders creating a safe space for people to speak up, make mistakes, and bring their full selves to work [6]. Edmondson's work on psychological

safety has influenced academic research in management, health care, and education [6]. Her research has shed light on the importance of creating a psychologically safe environment for teams and organizations to thrive.

Additionally, the goal of Project Aristotle, a research initiative by Google, was to discover the secrets of effective teams at Google [8]. This project was named after Aristotle's quote, "the whole is greater than the sum of its parts," as the researchers believed that employees can do more working together than alone. The goal of the project was to answer the question: "What makes teams successful?". Google researchers studied hundreds of Google's teams to determine why some stumbled while others soared. Some of the company's best statisticians, organizational psychologists, sociologists, and engineers were gathered for this project to study the habits and tendencies of team members. The researchers analyzed over 250 different team attributes, conducted more than 200 interviews, and studied 180 Google teams over two years. The researchers found that the most successful teams shared the following five traits. Psychological safety: Team members feel safe to take risks and be vulnerable in front of each other. Dependability: Team members complete high-quality work on time. Structure and clarity: Team members have clear roles, plans, and goals. Meaning: Work is personally important to team members. Impact: Team members believe that their work matters and creates change. The research showed that engineering the perfect team is more subjective than we would like, but focusing on these five components increases the likelihood of building a dream team [8]. The disadvantage of a work environment with low psychological

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safety is that team members have to work with constant anxiety. Working with anxiety leads to a decline in productivity and an increase in turnover [6,9]. If psychological safety is not ensured, the necessary information sharing and exchange of opinions will not be carried out due to fear of denial from those around them. Healthy conflict is an essential part of any workplace, as it can lead to improved outcomes, fresh perspectives, and growth for a business. It is important to distinguish between healthy and unhealthy conflict [10]. Healthy conflict is based on mutual respect and trust, with participants being able to express their thoughts without being bullied or put down for having a difference in opinion. To foster healthy conflict, it is important to encourage open communication, set clear expectations, embrace diversity, encourage healthy debate, and lead by example. In this way, teams can experience more productivity, more engagement, and more innovation, creativity, and collaboration.

### 3. Psychological safety in health care

In most parts of the world, psychological safety is very patchily evident, and indeed, even within hospitals and departments, peoples' experience of this can be very variable; this is, after all, a manifestation of leadership styles. In many parts of the world, health care is still extremely hierarchical, and cultural norms and expectations discourage challenging senior/older/male figures. Health care consists of many professionals working together, with each expert having their own common sense. Furthermore, among the specialists with different specialties, there are also unqualified people, all working toward the same mission for the healthy recovery of patients. Differences in common sense become barriers to communication. It is only natural that their specialties, knowledge, and viewpoints will vary. It is important to share mental models, as each member has their own awareness and perspective. An environment in which everyone can demonstrate this is a psychologically safe environment. It is imperative to be able to understand the rich perspectives of various people and understand that hesitation is a safety issue. It is permissible to point out failures and overreact to problems. Psychological safety includes creating an atmosphere of trust, respect, and mutual support. It involves recognizing, acknowledging, and addressing the emotional needs of everyone involved in the health-care process (e.g., patients, caregivers, and health-care staff) [11]. Psychological safety also means creating an open dialog between health-care providers and patients to ensure that everyone is comfortable and confident in the care patients receive. In a health care setting, psychological safety is especially important. Psychological safety is also important for health-care providers to ensure that they provide a safe environment for their patients—this can include providing a comfortable and no-blame atmosphere for patients to express themselves, as well as actively listening to their needs and concerns.

### 4. Professionalism with psychological safety

To manifest the power of health care teams, interdisciplinary teams include professionals from different disciplines working together toward a common purpose and shared goals [12,13]. They collaborate to set goals, make joint assessments, diagnose, and develop treatment plans. This collaborative approach ensures that all aspects of a patient's care are considered and addressed. An interdisciplinary team is a group of health care professionals with various areas of expertise who work together collaboratively toward the goals of their clients or patients. These teams integrate multiple disciplines through collaboration to provide comprehensive and holistic care and have been shown to improve patient outcomes. They can provide better care, reduce medical errors, expedite treatment, and reduce the length of hospital stays. By bringing together diverse perspectives and expertise, interdisciplinary teams can provide a more comprehensive and well-rounded approach to patient care. They require effective communication and coordination among team members. This includes sharing significant information,

reviewing and updating care plans, and collaborating with members from other disciplines [14]. Clear communication and coordination help ensure continuity of care and prevent gaps or duplication in services. These teams promote role interdependence, as each team member's expertise and contributions are valued and respected. This means recognizing and utilizing the unique skills and knowledge that each discipline brings to the team. It also involves respecting individual members' autonomy and experience while working toward common goals. Interdisciplinary teams benefit patients and provide professional development opportunities for health care professionals. Working in interdisciplinary teams allows professionals to learn from each other, broaden their understanding of different disciplines, and enhance their own skills and knowledge [15]. While there is ongoing research and discussion about the characteristics and processes of effective interdisciplinary teams, the importance of collaboration, communication, shared goals, and respect for each discipline's expertise is consistently highlighted. Interdisciplinary teams play a vital role in providing comprehensive and patient-centered care, improving outcomes, and promoting a holistic approach to health care.

Within an interdisciplinary team, followership is a reciprocal process of leadership that refers to the willingness to follow within a team or organization. It is the ability to take direction well, get in line behind a program, be part of a team and deliver on what is expected of you. Followership is often overlooked in an organization, but it is a critical role that is essential to a leader's success. Good followers have a number of qualities, including being proactive, detail-oriented, committed to the organization's goals and an essential part of leadership. It is a reciprocal process that involves active participation in the pursuit of organizational goals. Weak followership can lead to poor work ethic, bad morale, distraction from goals, unsatisfied customers, lost opportunities, high costs, product quality issues, and weak competitiveness.

### 5. Patient engagement

Patients often come to the hospital with fear and anxiety and need psychological safety. Patient engagement is a process of involving patients in the care they receive, including providing them with information and resources to make informed decisions and allowing them to participate in care policy [16]. This process can be achieved through patient education and empowerment, patient-provider communication, and patient self-management [17]. It is an important part of patient-centered care, which focuses on understanding and meeting the needs and preferences of each patient. The goal of patient engagement is to improve health outcomes and patient satisfaction [18,19]. The theme of World Patient Safety Day 2023 is "Engaging patients for patient safety" [20]. It recognizes the crucial role patients, families and caregivers play in the safety of health care. Evidence shows that when patients are treated as partners in their care, significant gains are made in safety, patient satisfaction and health outcomes [18,19]. By becoming active members of the health care team, patients can contribute to the safety of their care and that of the health care system as a whole. The World Health Organization calls on all stakeholders to take necessary action to ensure that patients are involved in policy formulation, are represented in governance structures, are engaged in code signing safety strategies and are active partners in their own care. This can only be achieved by providing platforms and opportunities for diverse patients, families, and communities to raise their voice, concerns, expectations and preferences to advance safety, patient centeredness, trustworthiness, and equity [20]. Patient and family engagement was embedded in the Global Patient Safety Action Plan 2021–2030 [21] as the main strategy for moving toward eliminating avoidable harm in health care.

### 6. Patient engagement with psychological safety

Psychological safety has been found to have a positive impact on patient engagement in health care settings [19]. Patients are more likely

to feel comfortable and open up about their concerns when they perceive psychological safety in their interactions with health care providers [7]. In addition, psychological safety has been linked to patient safety, interprofessional collaboration, engagement in quality improvement work, learning from failures, and reporting adverse events [5]. To enhance psychological safety in health services, health care organizations can establish a council of patients and actively encourage family/career participation. Creating a psychologically safe environment in health care settings fosters a culture in which individuals can speak up with new ideas, questions, and concerns in an effort to do better. This can lead to better communication and collaboration between health care providers and patients, ultimately improving the patient experience [22].

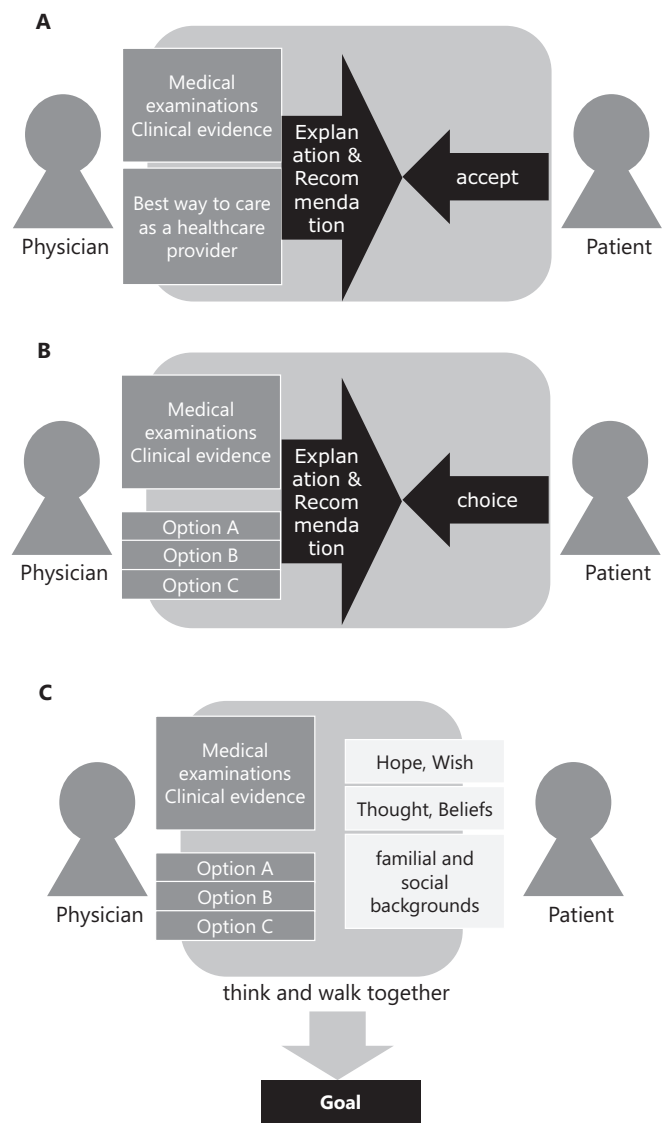
**7. Psychological safety in shared decision-making**

Psychological safety between medical staff and patients is also key to successful shared decision-making. Shared decision-making is a process in which medical providers and patients work together to make decisions about their care; it allows for more collaboration and understanding between patients and providers and helps to ensure that decisions are based on the patient’s preferences and values [2,23,24]. For example, the implementation of a decision aid to encourage shared decision-making may be difficult if clinicians do not have a good shared mental model with patients. Patient-Centered Care: Shared mental models can help health care professionals conceptualize patients as professionals, decision-makers, collaborators, and members of inter-professional health care teams. This can facilitate patient-centered care by enabling health care professionals to understand and respect the patient’s perspective and preferences. Shared mental models are important among health care providers, and they contribute to shared decision-making.

Informed consent is an important aspect of patient-centered care and involves respecting patients’ autonomy and rights. It ensures that patients are actively involved in their health care decisions and have a clear understanding of the risks, benefits, and alternatives. Health care providers have a responsibility to provide the necessary information and engage in open and transparent communication to facilitate informed consent [24]. Technically, we have to distinguish among the terms informed consent, informed choice and shared decision-making (Fig. 1). Informed consent involves medical examinations and clinical evidence. Physicians explain and recommend the best approach to care. Then, patients comprehend and accept the physicians’ policies. Informed choice also involves medical examinations and clinical evidence, and physicians explain and recommend some ways to care for patients with benefits and risks. Shared decision-making also consists of medical examinations and clinical evidence, and physicians explain and recommend some ways to care for patients with benefits and risks. Furthermore, patients and physicians think and walk together in relation to the hopes, wishes, thoughts, beliefs, and familial and social backgrounds of the former.

**8. Strategies to enhance patient engagement with psychological safety**

In the United Kingdom, there is a mantra "no decision about me without me", but in practice, a paternalistic approach remains not uncommon, especially for those who are very ill and those with limited health literacy. The authors make an important observation that psychological safety is an important context for true shared decision-making. Shared decision-making is an under researched area and is not uniform. It is also vulnerable to cultural contexts and is often squeezed out by a medical model for very consequential things. A bad relationship between patients and health care providers negatively affects patients and families. Patient engagement is a moral imperative that the health care industry and government agencies must address



**Fig. 1.** Typology of physician explanation for patient. A. Informed Consent, B. Informed choice, C. Shared decision-making.

across the continuum of medical education, residency training, physician practice, and practice environments. Enhancing patient engagement is a good business practice that can yield positive benefits to the health care industry as well as a moral obligation toward health care providers and patients. Even though patient engagement is multifactorial with no simple or quick solution, the paradigm shift toward improvement must start now at the individual and organizational levels.

Individual: In conventional thinking, relationships between patients and health care providers were mislabeled as personal matters within the medical community, health care industry, and public domains. This conceptual error delayed the understanding of this critical issue and resulted in many missed opportunities for effective prevention and management. Although physician demographic factors, such as age, gender, specialties, environments and hospital size, play a role in the relationship, the complex interactions between the individual’s susceptibility and the working environment determine the occurrence and outcomes of patient engagement. Protective modalities such as mindfulness, resilience reinforcement, and relationship building are helpful [25]. However, special attention should be given to the whole spectrum of human well-being or PERMA (positive emotions, engagement, relationships, meaning, and accomplishments) elements through positive psychology: positive emotions (of which happiness and life satisfaction

are all aspects), engagement, relationships, meaning, and achievement. It is essential to know that no one element is more important than the others but, rather, that each contributes to the whole [26]. Many tools, such as didactic education, workshops, and personal coaching, can be leveraged for PERMA purposes.

**Organization:** Increasing workloads without adequate staff and resource support are often cited as essential contributors to bad relationships between patients and health care providers. The awkward atmosphere rate can increase greatly when the workload is heavy and disproportionate to a physician's compensation. Health care professionals face challenges related to workload and long shifts. Indeed, health care providers can have heavy workloads due to a shortage of medical workers. They may work long shifts during holidays and weekends, and they may also work via telecommunication. These factors can contribute to a busy schedule for health care providers. Regarding the specific application of the PERMA model to organizational functions such as IT or finance, there may be limited research or papers specifically addressing this topic. However, the PERMA model can be applied to organizational contexts by promoting positive emotions, fostering engagement and meaningful work, cultivating positive relationships among team members, and recognizing and celebrating accomplishments within the organization. Organizations can create a positive work environment that supports employee well-being and satisfaction by incorporating the principles of the PERMA model into their practices and policies.

**Culture and community:** Additionally, both macroaggressions and microaggressions, either from patients or colleagues, are widespread in the health care environment. This creates psychologically unsafe working environments and is linked to increased bad relationships between patients and health care providers. A psychologically safe culture and practice environment with the Engagement, Inclusion and Diversity principle in mind should be the top priority for any organization and its leaders, especially in the areas of communication and signage. Special committees such as "joy in medicine" committees [27] and workflows must be created with allocated time to quickly implement regulations without passing the strain of interpretation and fear of regulation on to the frontline health care practitioners [28]. Methods for enhancing patient engagement with psychological safety with social media nuances, systems to assist with messaging demands, and integrated technologies with training must become priorities [29]. These cannot be passed down to individuals, as they affect the entire workplace culture and are not limited to a single person.

## 9. Limitation

Although psychological safety is appealing as a concept and should translate to benefit, in practice, there is little real evidence for this, and the research needed to demonstrate the association is difficult.

## 10. Summary

It is incumbent on us to understand that optimal and safe patient care primarily requires the optimization of psychological safety. For the long-term benefit of the health care industry and its customers, a collective effort to measure, monitor, and develop strategies to enhance patient engagement with psychological safety should be made systemically and proactively. Ultimately, psychological safety is essential for effective communication and collaboration and is key to successful health care. It is important for health care providers to create an environment that is comfortable and safe for their patients and to actively listen to their concerns and needs.

## Declaration of Competing Interest

The authors declare the following financial interests/personal relationships which may be considered as potential competing interests:

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## References

- [1] Rodziewicz TL, Houseman B, Hipskind JE. Medical error reduction and prevention. [Updated 2023 May 2]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2023 Jan. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK499956/>. Accessed July 21, 2023.
- [2] Fukami T, Uemura M, Nagao Y. Doctors-in-training support strategy from incident report point of view. *Ann Med Surg (Lond)* 2020 Jun 26;56:139–41. <https://doi.org/10.1016/j.amsu.2020.06.032>. PMID: 32637089; PMCID: PMC7327027.
- [3] Uematsu H, Uemura M, Kurihara M, Umemura T, Hiramatsu M, Kitano F, et al. Development of a novel scoring system to quantify the severity of incident reports: an exploratory research study. *J Med Syst* 2022 Dec 12;46(12):106. <https://doi.org/10.1007/s10916-022-01893-1>. 36503962.
- [4] Fukami T, Nagao Y. The comprehensive double loop activities for patient safety management. *Ann Med Surg (Lond)* 2022 Apr 1;77. <https://doi.org/10.1016/j.amsu.2022.103520>. 103520. PMID: 35638001; PMCID: PMC9142377.
- [5] Fukami T, Uemura M, Terai M, Nagao Y. Enhanced hospital-wide communication and interaction by team training to improve patient safety. *Nagoya J Med Sci* 2020 Nov;82(4):697–701. <https://doi.org/10.18999/nagjms.82.4.697>. PMID: 33311800; PMCID: PMC7719449.
- [6] Edmondson A. Psychological safety and learning behavior in work teams. *Adm Sci Q* 1999;44(2):350–83. <https://doi.org/10.2307/2666999>.
- [7] Fukami T. Shared decision making with psychological safety. *Lancet*. 2023 Apr 8; 401(10383):1153–4. [https://doi.org/10.1016/S0140-6736\(23\)00344-6](https://doi.org/10.1016/S0140-6736(23)00344-6). 37030882.
- [8] re:Work Guide: understand team effectiveness. <https://rework.withgoogle.com/p/rint/guides/5721312655835136/>; 2020. Accessed July 21, 2023.
- [9] Kim S, Lee H, Connerton TP. How psychological safety affects team performance: mediating role of efficacy and learning behavior. *Front Psychol* 2020 Jul 24;11:1581. <https://doi.org/10.3389/fpsyg.2020.01581>. PMID: 32793037; PMCID: PMC7393970.
- [10] Itzhakov G, DeMarree KG. Attitudes in an interpersonal context: Psychological safety as a route to attitude change. *Front Psychol* 2022 Jun 26;13. <https://doi.org/10.3389/fpsyg.2022.932413>. 932413. PMID: 35959020; PMCID: PMC9361786.
- [11] Grailey KE, Murray E, Reader T, Brett SJ. The presence and potential impact of psychological safety in the healthcare setting: an evidence synthesis. *BMC Health Serv Res* 2021 Aug 5;21(1):773. <https://doi.org/10.1186/s12913-021-06740-6>. PMID: 34353319; PMCID: PMC8344175.
- [12] Varpio L, Teunissen P. Leadership in interprofessional healthcare teams: empowering knotworking with followership. *Med Teach* 2021 Jan;43(1):32–7. <https://doi.org/10.1080/0142159X.2020.1791318>. Epub 2020 Jul 16. 32673138.
- [13] Nancarrow SA, Booth A, Ariss S, Smith T, Enderby P, Roots A. Ten principles of good interdisciplinary team work. *Hum Resour Health* 2013 May 10;11:19. <https://doi.org/10.1186/1478-4491-11-19>. PMID: 23663329; PMCID: PMC3662612.
- [14] Peabody J, Lucas A, Ziesmann MT, Gillman LM. A cross-sectional study evaluating the relationship between followership type and burnout amongst critical care followers. *Intensive Crit Care Nurs* 2022 Oct;72:103275. <https://doi.org/10.1016/j.iccn.2022.103275>. Epub 2022 Jun 7. 35688750.
- [15] McKimm J, Vogan CL. Followership: much more than simply following the leader. *BMJ Lead* 2020;4:41–4.
- [16] Patient engagement. Technical series on safer primary care World Health Organization. World Health Organization; 2016. <https://apps.who.int/iris/handle/10665/252269>.
- [17] Ito A, Sato K, Yumoto Y, Sasaki M, Ogata Y, et al. *Nurs Open* 2022 Jan;9(1):467–89. <https://doi.org/10.1002/nop.21086>. Epub 2021 Oct 15. PMID: 34651454; PMCID: PMC8685887.
- [18] Hunt DF, Bailey J, Lennox BR, et al. Enhancing psychological safety in mental health services. *Int J Ment Health Syst* 2021;15:33. <https://doi.org/10.1186/s13033-021-00439-1>.
- [19] Grailey KE, Murray E, Reader T, Brett SJ, et al. *BMC Health Serv Res* 2021 Aug 5;21(1):773. <https://doi.org/10.1186/s12913-021-06740-6>. PMID: 34353319; PMCID: PMC8344175.
- [20] World Patient Safety Day. Engaging patients for patient safety. <https://www.who.int/news-room/events/detail/2023/09/17/default-calendar/world-patient-safety-day-2023-engaging-patients-for-patient-safety>; 2023. Accessed July 21, 2023.
- [21] Global Patient Safety Action Plan. <https://www.who.int/teams/integrated-health-services/patient-safety/policy/global-patient-safety-action-plan>; 2021–2030. Accessed July 21, 2023.
- [22] O'Connor A, Wennberg JE, Legare F, Llewellyn-Thomas HA, Moulton BW, Sepucha KR, et al. Toward the "tipping point": decision aids and informed patient choice. *Health Aff* 2007;26(3):716–25.
- [23] Elwyn G, Frosch D, Thomson R, Joseph-Williams N, Lloyd A, Kinnersley P, et al. Shared decision making: a model for clinical practice. *J Gen Intern Med* 2012 Oct; 27(10):1361–7.
- [24] Whitney SN, McGuire AL, McCullough LB. A typology of shared decision making, informed consent, and simple consent. *Ann Intern Med* 2004 Jan 6;140(1):54–9. <https://doi.org/10.7326/0003-4819-140-1-200401060-00012>. 14706973.
- [25] Pandit AS, Reka A, Layard Horsfall H, Marcus HJ. Mindfulness training for young neurosurgeons: a virtual multicenter prospective pilot study. *World Neurosurg* 2022;164:e446–57. <https://doi.org/10.1016/j.wneu.2022.04.128>.

- [26] Bazargan-Hejazi S, Shirazi A, Wang A, et al. Contribution of a positive psychology-based conceptual framework in reducing physician burnout and improving well-being: a systematic review. *BMC Med Educ* 2021;21(1):593. <https://doi.org/10.1186/s12909-021-03021-y>.
- [27] Joy in Medicine. Health system recognition program. Updated November 11. Accessed, <https://www.ama-assn.org/practice-management/sustainability/joy-medicine-health-system-recognition-program>; 2023.
- [28] Hirayama M, Fernando S. Burnout in surgeons and organisational interventions. *J R Soc Med* 2016;109(11):400–3. <https://doi.org/10.1177/0141076816666810> [CrossRef] [Google Scholar].
- [29] Thomas Craig KJ, Willis VC, Gruen D, Rhee K, Jackson GP. The burden of the digital environment: a systematic review on organization-directed workplace interventions to mitigate physician burnout. *J Am Med Inform Assoc* 2021;28(5): 985–97. <https://doi.org/10.1093/jamia/ocaa301>.