



The Business, Ethics, and Quality Cases for Consumer Engagement in Nursing

Susan Hassmiller, PhD, RN, FAAN
Ani Bilazarian, BSN, RN

OBJECTIVE: The aims of this study were to illustrate the quality, safety, cost-effectiveness, and ethics of consumer engagement initiatives and identify promising practices and leadership strategies used by nursing leaders.

METHODS: A literature review was performed with supplementary interviews conducted with 25 key nursing informants including nursing executives and chief nursing officers at acute care hospitals, community health centers, policy institutions, and quality and safety organizations. A narrative synthesis approach was used to identify and compare existing measures of consumer engagement and compassionate care in acute care settings. One-hour semistructured interviews were performed, and information was gathered by notes and audio recordings.

RESULTS: Consumer engagement activities focusing on compassionate patient and provider interactions involving patients and family as partners on the care team are associated with increases in treatment savings and patient safety in terms of length of stay and reduced medication errors. Engagement initiatives support employee health and reduce compassion fatigue.

CONCLUSION: Findings illustrate the impact of patients and family engagement in decision making and promising organizational practices that reinforce engagement.

Author Affiliations: Senior Adviser for Nursing and Director of Future of Nursing: Campaign for Action (Dr Hassmiller) and Nursing Intern (Ms. Bilazarian), Robert Wood Johnson Foundation, Princeton, New Jersey; Staff Nurse (Ms Bilazarian), Emergency Department, New York–Presbyterian/Weill Cornell Medical Center.

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Correspondence: Dr Hassmiller, Robert Wood Johnson Foundation, 50 College Rd E, Princeton, NJ 08540 (shassmiller@rwjf.org).

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Educated to treat the unique needs of patients and families (consumers) with a holistic and compassionate approach, nurses are well positioned to lead consumer engagement initiatives. Consumer engagement aligns well with Robert Wood Johnson Foundation's vision to build a culture of health and well-being, including promoting patient care that is high quality and inviting of individual preferences.¹ This article reviews the need for consumer engagement in acute care settings and sets as its framework the quality, safety, business, and ethics cases. For purposes of this research, engagement activities refer to any methods or tools used to involve individual needs and goals of patients and families (consumers). Activities including shared decision-making tools, patient education videos, and activation measures are linked to higher retention rates and profitability,² shorter lengths of stay (LOS) in the hospital,³ greater adherence to treatment recommendations,⁴ and increases in patient experience scores.⁵ The nurse's role in care coordination, education, and holistic management of patients' needs naturally aligns with these strategies and significantly impacts a patient's experience.^{6,7}

Exploring Consumer Engagement

A literature review and supplemental interviews of 25 nurse leaders were conducted to illustrate the key role nurse leaders have in leading consumer engagement strategies, including supporting a culture of compassion. Key challenges, facilitators, and strategies used to improve consumer engagement are outlined below. Consumer engagement and its connection to safety and quality, ethics, and cost savings are explored.

Assumptions:

1. Enhancing the patient experience through consumer engagement is linked to improvements in

safety and quality, cost savings, and patient and provider satisfaction.

2. Promising practices in consumer engagement have positively influenced care outcomes, but more research is needed to evaluate and validate the impact of various consumer engagement practices.
3. Nursing executives must lead with courage to prioritize a culture of engagement and compassion.

Methodology

Research Questions:

1. What is the link between consumer engagement, quality and safety, ethics, and cost of care?
2. What are the primary barriers to consumer engagement among nurses?
3. What are the primary facilitators and promising practices used in consumer engagement among nurses?
4. What is the nurse leader's role in championing consumer engagement?

The authors completed a literature review supplemented by interviews of 25 nursing executives and chief nursing officers (CNOs). A narrative synthesis approach was used involving a review and synthesis of findings from multiple studies to identify and compare existing measures of consumer engagement and compassionate care in clinical settings. A search of the literature was conducted using the electronic databases PubMed, MEDLINE, Google Scholar, and ProQuest. This research received nonsubstantive institutional review board approval.

In addition, gray literature searches and relevant organization Web sites were reviewed by Google searching key terms, including healthcare consumer, consumer engagement, patient engagement, patient- and family-centered care, compassionate care, nursing, nursing's role, CNOs, and costs of care. Manual searches of reference lists from relevant articles were performed by reviewing abstracts of references used in relevant articles. This initial review of literature was performed to ensure broad coverage of the topic and to identify the impact of consumer engagement on quality, safety, and cost-efficiency.

The literature review and synthesis are supplemented by interviews of 25 nursing leaders responsible for initiatives focused on improving consumer engagement and patient- and family-centered care. Interviewees were limited to providers within the United States and included acute care hospitals, com-

munity health centers, policy institutions, and quality and safety organizations. At each institution, the most senior nursing staff responsible for consumer engagement and patient- and family-centered initiatives was interviewed. One-hour semistructured interviews were performed, and information was recorded through notes and audio recordings.

Data Analysis

A narrative synthesis was used to analyze data from the literature review. Findings were organized by themes related to barriers, facilitators, and promising practices for consumer engagement and examples that illustrated how the business, ethical, and quality case was described by interviewees and in the literature. For the key informant interviews, a topline content analysis was used to categorize interview responses that supplement the major themes from the literature review. Open and axial coding was performed in order to organize responses into themes and elucidate findings.

Results

While the quality and safety, business, and ethics cases for consumer engagement are outlined separately below, it should be noted that paying attention to all 3 will create the synergy needed for optimal clinical effectiveness and consumer engagement. Figure 1 depicts the relationship between an ethical commitment to consumer engagement and high-quality care. In turn, it is surmised that the results of high-quality and safe care will then directly impact cost and reimbursement to the health system, including improved Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) scores. Of note is the overlap between quality/safety, business, and ethics.

Research Question 1: What Is the Link Between Consumer Engagement, Quality and Safety, Ethics, and Cost of Care?

Consumers who are more engaged in their care tend to better manage their chronic conditions, with less anxiety and stress and shorter LOS in the hospital.³ When consumers are included in engagement activities such as through the use of shared decision-making tools, open visiting hours, or clinical staff asking, "What matters to you?"⁸ symptom assessment and decision making will improve,⁹ as well as medication errors and emergency department return visits.¹⁰ Interviewees confirmed that activities focused on engaging families at all levels of an organization resulted in increased patient experience scores and decreased LOS and medication errors.

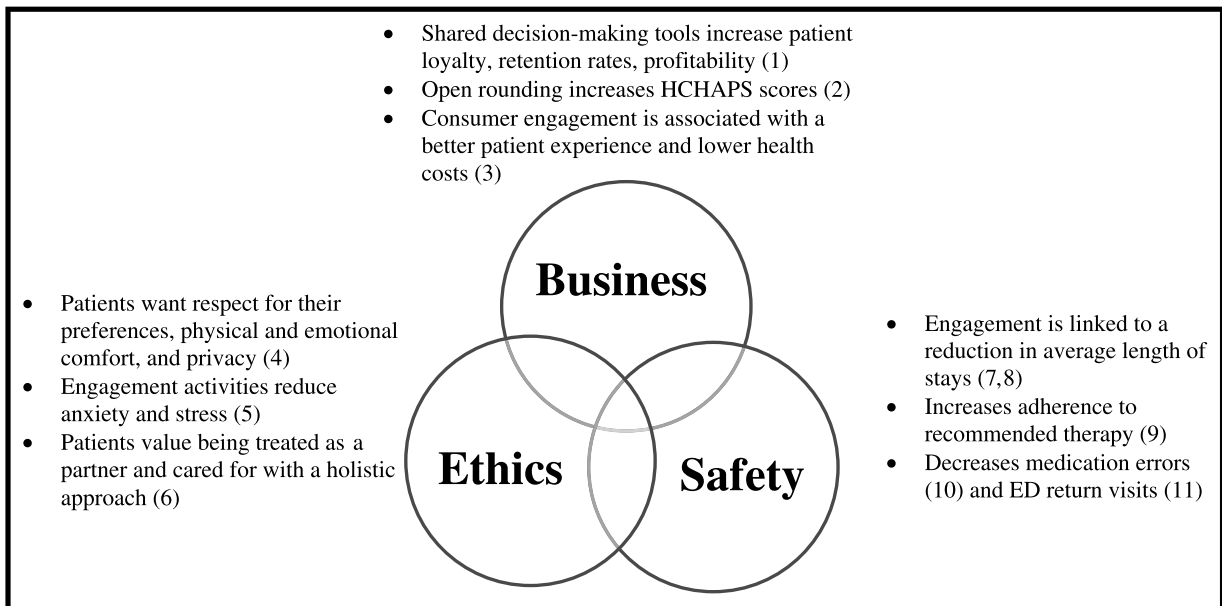


Figure 1. The interdependence of the business, ethics, and safety cases.

Interactions that enhance trust and compassion are shown to lead to greater adherence to treatment recommendations and preventive care.⁴ In primary care specifically, adherence rates are found to be 3 times higher when relationships are characterized by high levels of trust and patient's feeling known as a whole person.⁴ One study found that the single greatest predictor of whether patients with human immunodeficiency virus adhered to treatment was whether they felt “known as a person” by their provider.¹¹ These findings are supported by key informants that linked improved patient outcomes and experience scores with engagement activities.

Research Question 2: What Are the Primary Barriers to Consumer Engagement Among Nurses?

Time

The pressure of time and the need for efficiency were found in the literature and among our interviewees as the greatest impediment for clinicians to delivering compassionate care¹² and consumer engagement.¹³ This observation was shared by healthcare team members and patients and families.⁵ Time pressure can lead to providers neglecting to include patient preferences in plans of care and failing to note or act on these preferences when they are articulated.¹⁴

From the standpoint of efficiency, some providers view compassionate interactions as wasting time.¹² Interviewees agreed time was a barrier but suggested reframing efficiency to consider it a means toward more effective clinical care, with compassion as a key ingredient to achieving high-quality and safe care. Thus, time spent on engagement was recognized as a means of saving time on other activities.

Technology

Technology can add to or detract from opportunities for engagement with consumers, less due to the purpose of the tool itself than with how providers choose to use it.¹⁵ It was noted that the electronic medical record, although a crucial tool, can interrupt engagement with patients and families by typing and diminishing eye contact even as patients talk about intimate concerns.¹⁶ Although this distraction may be subtle, so too are the nuances in conversation and body language, which are essential for establishing trust, rapport, and optimal treatment plans.¹⁷ Interviewees suggested methods such as open charting and educational videos can be used to inform consumers and support their engagement on the healthcare team.

To be informed participants and effective self-managers, consumers must be aware of and have access to accurate information enabled by technology. One key informant noted that “providing consumers with accurate, understandable, and accessible information is the 1st step in empowering their decision making and enlisting them as partners in managing their health and the cost of their healthcare.” Information sharing enabled by technology was deemed key to informing consumers and equipping them to be engaged.

Hesitation and Fear

Consumers endure anxiety, confusion, and loss of control during a hospital stay. These emotions exist in addition to an underlying fear of prescribed therapies¹⁸ and of being lost trying to navigate the system or finding a point person.¹⁹ Although open rounds were universally considered to be a positive strategy to engaging consumers, interviewees indicated

that fear may reduce a patient's and family's capacity to involve themselves in rounds and decision making. The literature supports that if patients are genuinely invited to attend and become involved in their care, they may feel more comfortable to express fears and anxieties, allowing care teams to better prioritize individual goals and treatment and truly demonstrating engagement.²⁰

Hospital staff may have their own fears related to consumer engagement. Engagement interventions such as including patients and families in rounding may evoke fears of litigation, fear of physical or verbal abuse from patients or families, or fear of having to manage unrealistic patient expectations.¹⁸ Interviewees also suggested that nurses may be afraid to ask consumers about their goals for fear of surfacing a problem they are unable to solve or that will take too much time away from other responsibilities. Nurse executives can play important roles in addressing these fears and equipping their staff with strategies to overcome this.

Research Question 3: What Are the Primary Facilitators and Promising Practices Used in Consumer Engagement Among Nurses?

Culture Change

Culture in this context is used to describe the shared set of values or organizational norms that guide employee behavior and patient expectations and lead to an understanding of “how things are done around here.” Culture and ethics are interrelated according to our interviewees as they referenced the importance of establishing a shared set of expectations between providers and consumers. The interviewees pointed to strategies of employee training, modifying hiring strategies to ensure alignment with culture and modification of clinical processes that make transition to a new culture successful. One interviewee helped lead her organization and its 200 000 employees in a culture change toward 5 values of integrity, compassion, relationships, innovation, and performance. This change was enabled by committed leadership, consistent language ingraining their new mission and values, recognition and reinforcement activities tied to financial incentives, modification of hiring strategies, and workshops led by trained “culture ambassadors.”

Leadership

As major executives in healthcare systems, CNOs are jointly accountable for promoting and influencing the culture of an institution while overseeing the strategic direction to ensure excellent patient care at the point of service.^{21,22} Bedside nurses as the implementers of care are experienced in caring for the needs of specific patient populations and

understanding barriers and facilitators to care delivery. Both CNOs and bedside nurses have a major role to play in ensuring leadership around consumer engagement. Interviewees noted the importance of singular, consistent, and visible leadership in organizational change. To support engagement initiatives, interviewees endorsed the need for more courageous and confident nurse leaders to prioritize and role model the values of compassion and holistic patient care at the executive level.

Employee Engagement

Data indicate that hospitals with more engaged staff have significantly greater patient safety and HCAHPS scores, job satisfaction, and retention.²³ Interviewees with successful consumer engagement initiatives have ensured that the values and mission of their organizations are ingrained in each employee's sense of purpose. One interviewee described inviting environmental services personnel to round with nursing staff to discuss areas needing improvement from a team perspective.

Interviewees recognized that for employees to be successful they need access to resources that support their effort to engage consumers. Tools and technology intended to improve interdisciplinary communication, which includes the patient voice, should be conveniently integrated in ordering practices, nursing diagnoses, rounding, and clinical decision making. A selection of other interviewee promising practices can be found in Table 1.

Staff Support

An increasing number of nurses report feeling burnout in their current jobs²⁴ and frustrated by their work environments and staffing levels.²⁴ Employee health and well-being can be improved through strategies including appropriate staffing levels and enhanced opportunities for meaningful work. These strategies can translate into improvements in work-related stress and burnout¹⁸ and result in increases in quality of care and patient experience and decreases in readmission rates.²⁵ Interviewees validated the impact of healthy work environments and staff support by saying that providers must first feel heard and valued by management in order to engage compassionately with consumers. In order to do this effectively, CNOs can advocate for frontline staff at the executive level and ensure access to resources and tools that support the psychosocial health of nurses and other providers.

Healthier workforce environments also significantly impact the consumer experience. Appropriate staffing and work hours allow nurses to provide better surveillance, education, and discharge instruction for their patients—all key engagement activities.²⁴

Table 1. Interviewee Promising Practices

Promising Practices	Description	How Practices Support Engagement according to interviewees	How Practices Support Nurses according to interviewees
Transforming Care at the Bedside volunteers	Clinically minded volunteers provide support to patients and families and communicate patients' needs to the care team. ^a	Volunteers support and comfort patients while learning about their healthcare goals without the burden of time or intimidation.	Patient and family's goals can be shared through the volunteer saving time and increasing nurse efficiency without neglecting a patient's individual needs.
Shared decision-making tools	Decision-making tools are used to share information and facilitate discussions about treatment options between patient and provider. ^b	Tools help patients make informed decisions reflecting their values and goals and alleviate misaligned patient expectations by equipping patients for decision making.	Anticipating patient questions and concerns saves time by ensuring efficient and empathetic conversation.
Patient activation measure (PAM)	PAMs are validated tools containing 22 items used to assess a patient's knowledge, skill, and confidence in self-management. ¹⁴	PAMs facilitate information sharing and coaching to promote patient activation and further engagement.	PAMs assess a patient's capacity for engagement activities, enabling nurses to better manage timing and prepare for education and a patient's level of involvement.
Open visiting hours/rounding	Explicit invitation that families and friends are welcome at all times. Patients and families are always included in rounding if they prefer. ⁵	Reduces patient's and family's fear with a message that it is their right to participate in information sharing and decisions that affect them.	Evidence from 1 hospital shows that changing the visiting hours led to a reduction in medical errors from 7%-9% to 1% and patients being discharged sooner. ⁵ Open rounding allows patients to be aware of safety concerns and helps them better manage their own care.
White boards	Opportunity for patients and family to write their own health goals that can be visible and clear to all members of the care team. ^c	Ensures patients and family are involved and engaged in the recovery process, with visible and individual goals.	Helps nurses understand what a patient's health goals are and acts as a reminder for the whole care team.
Patient education videos	Used to help prepare patient's expectations by showing visuals of what procedures or processes they will experience during their care. ^d	Videos ensure that patients are an informed consumer and are prepared to be an active participant.	By informing patients early on of expectations, nurses can prepare patients to prevent concerns and save time by guaranteeing all patients would be educated consumers.
Clinical nurse leader (CNLs) rounding	CNLs oversee care coordination of specific patients and serve as a focal point for the patient, family, and healthcare team. ^e	Daily rounding and constant communication allow CNLs to promote a team-based approach to care and ensure that patients are included as partners on the team.	CNLs act as a coordinator for the care team and can save nurse's time by facilitating conversations and answering conversations for the patient and family.
Bedside charting—enabling patient access	Allows patients to view their charts on a tablet, providing them access to latest laboratory results, clinician messaging, and nontechnical explanations of their treatment. ^f	Enables patients to be informed participants in their care by keeping updated with their treatment, laboratory tests, and documentation.	Allows for opportunities for questions about care or treatment during the day to ensure efficiency during rounding.
Code lavender	Program where chaplains are used to support frontline staff for crisis intervention when they have reached their emotional limit. ^g	This tool is used to prevent and manage compassion fatigue in frontline staff so they can care for patients to the best of their ability.	Ensures nurses are emotionally and physically supported and can practice where they feel safe and respected.

^aTransforming Care at the Bedside. Cedars-Sinai. <https://www.cedars-sinai.edu/About-Us/Volunteer-Opportunities/Programs/Student-Programs/Transforming-Care-at-the-Bedside.aspx>. Accessed August 11, 2017.

^bMayo Clinic Shared Decision Making National Resource Center. Mayo Clinic. <http://shareddecisions.mayoclinic.org/>. Accessed August 11, 2017.

^cRutherford P, Lee B, Greiner A. *Transforming Care at the Bedside. Institute for Healthcare Improvement Innovation Series White Paper*. <http://www.ihc.org/resources/Pages/IHIWhitePapers/TransformingCareattheBedsideWhitePaper.aspx>. Published 2004. Accessed August 1, 2017.

^dPatient Education. Massachusetts General Hospital—Massachusetts General Hospital. <http://www.massgeneral.org/ortho/patienteducation/>. Accessed August 11, 2017.

^eTexas Health Resources Chief Nurse Executive Receives National Award. Texas Health Resources. <https://www.texashealth.org/news/texas-health-resources-chief-nurse-executive-receives-national-award>. Published February 26, 2013. Accessed August 11, 2017.

^fHospitals Improve Patient Experience with MyChart Bedside. Epic.com. <https://www.epic.com/epic/post/2812>. Published March 27, 2017. Accessed August 11, 2017.

^gDuffy MB. Code Lavender: Transforming the Human Experience in Healthcare. Vocera. <https://www.vocera.com/blog/code-lavender-transforming-human-experience-healthcare>. Published 2010. Accessed August 11, 2017.

Research Question 4: What Is the Nurse Leader's Role in Championing Consumer Engagement?

Engagement activities align naturally with the responsibility of those who provide the most direct patient care in hospitals and beyond.²⁴ As patient advocates, nurses are equipped to promote compassionate and engaged care that has significant impact on the consumer experience.⁷ Nurse leaders have a fundamental role in influencing the culture and strategic direction of an institution.²¹ The Institute of Medicine report on *The Future of Nursing: Leading Change, Advancing Health* states unequivocally that nurses can and should play fundamental roles in the transformation of the US healthcare system.²⁶ As health systems move toward greater patient-centeredness and consumer engagement, nurses have a duty to participate in and lead transformation efforts focused on consumer engagement.

The Ethics Case

Consumers value being engaged and treated as partners with a holistic approach to their care.²⁷ Patients want a provider who listens, acknowledges their condition, is honest, and treats them as an equal.^{2,4} True consumer engagement incorporates characteristics that matter to patients such as empowerment, support, and comprehensive communication and coordination.¹⁴ These needs align with nursing's roles of care coordination among providers, management of individual patient needs, and transitions within and out of health systems.²⁸ Interviewees highlighted the notion that nurse leaders have an ethical responsibility to lead in the area of consumer engagement. They spoke of the courage that was needed to organizationally commit to the values of compassion, patient advocacy, and consumer engagement at the executive level and translate those values to the bedside.

The Business Case

As public reporting of hospital ratings (eg, Consumer Reports), experience scores (eg, Centers for Medicare & Medicaid Services), and physician reviews (eg, Yelp) becomes more available and transparent, consumers have more avenues to learn about a hospital's reputation and performance, which may bear

more influence on patient choices and hospital market share. Patients value nonclinical characteristics of care and often choose hospitals based on reputation or personal experience.²⁹

Studies have shown that patient loyalty, retention rates, and profitability can increase when healthcare consumers are engaged actively in decision making²⁹ and are able to choose the most appropriate and economical choice¹¹ as an informed consumer. An analysis by UnitedHealthcare showed that patients engaged with treatment decision support—programs advising patients on treatment options, communication techniques, assessment of health literacy, and confidence in self-management—showed that 25% of patients selected more conservative treatment with average savings per treatment of more than \$11 000.³⁰ Adapting clinician rounds to be open exchanges with family and nursing staff at the bedside has led to improved HCAHPS scores¹⁹ and improved nursing efficiency.⁶

Embedding consumer engagement in organizational processes will require investments to be made that place true patient and family needs at the forefront. Yelp-reviewed providers of the future will be obligated to include a consumer's wishes to be respectfully engaged if only for the reason that it can directly impact their ratings and hospital reimbursements.

Conclusion

This study identifies strategies and organizational changes to enhance partnerships with consumers while supporting the quality and safety, business, and ethics cases for consumer engagement. Consumers value being engaged and treated as a partner in their own care,²⁹ and providers are fulfilled by this type of meaningful work.¹⁸ Compassionate and engaged care has the power to transform US health systems if nurses at all levels have the courage to lead and partner with patients and families. This is the essence of nursing in the new paradigm.

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