Psychological Safety Small Group One Page Document

Executive Summary

Objectives

Process

Steps Involved/Methodology

Questions Executives would want to know:

- What is goal? Accomplished with this integrated into ambulatory, LTC
    o To improve psych safety for patients & families to speak up in health care environment
    o Promote patient and family speaking up
    o We intend to achieve this through improving psych safety
    o Outcomes available to patients speaking up?
- Why are we doing this? Why now?
    o Tying to other initiatives (national/statewide)
        ▪ To reduce risk of safety events and improve patient satisfaction
        ▪ We could tie to pandemic
        ▪ Actual project have specific examples of handwashing
        ▪ In light of current world response to the covid 19 pandemic it is more important than ever to create an environment where patients and families are able to participate as a member of the team and confidently speak up and voice safety concerns
        ▪ Communication is impaired due to visitor limitations, don't have open communication with loved ones- leading to bad outcomes due to lack of full communication
            • Helping patients and families who are remote to a psych safe environment for open communication
            • Heighten anxiety from patients and family members
            •
        ▪ Upfront at beginning we add a who we are- WPSC and we're collaborative {add blurb}
            • Sub topic for psychological safety workgroup
- What are we asking executive teams to do?
    o Creating it say "we're looking for your support for
    o Several organizations to volunteer to participate in a survey and implementation of a tool to create an environment of psychological safety and speaking up
    o Will we ask them to do measurements? How do we measure success
        ▪ Submit HCAHP data (patient), culture of safety data (staff) willingly?
        ▪ HCAHP communication with nursing and physician
        ▪ "I was listened to and my concerns were addressed"
        ▪ Measure patient and family perspective and staff perspective separately
        ▪ Do we come up with specific questions?
    o How do you measure patient safety in LTC?
    o Designing for group to introduce to group broadly?

- o Generic distribution "whats in it for you"
- o "what will you get out of it"
  - ▪ simple implementation of free tool of questions that can asked by nurse/providers of patients to determine patient comfort level for speaking up for safety
- o "what's required for you to participate "
  - ▪ Administer the education our group developes for staff, patients families
  - ▪ Commitment during X time to utilize the identified language tool in the patient setting
  - ▪ Some sort of data submission in form of data you already collect (HCAHPS, questions, etc..)
  - ▪ Don't want analyzation just submitting data
  - ▪ Internal resources
- At the end we want to say are you interested in being selected for pilot, why are you interested? do you need more information and here is who you contact
- Choosing one setting or area
- Link to brief survey
  - o Yes I'm interested
  - o Tell us why
  - o Are you willing to pilot this with covid patients?
  - o Here is contact person if selected
- Quality improvement along the way- learn from experience in real time
  - o Disseminate lessons learned
  - o Think about real time QI questions to ask, barriers, changes to make moving forward