



Top Target Treatments

TOP TARGET TREATMENTS, *F. LEGA*
PRECISION HEALTH AND POPULATION HEALTH: CAN THEY INTERSECT EFFECTIVELY? *T. RASSAF ET AL.*
PERSONALISED MEDICINE: THE ROAD AHEAD, *D. PRITCHARD*
A HUMAN-CENTRIC APPROACH FOR DATA COLLECTION, *I. RÄSÄNEN & J. SINIPURO*
ENHANCING PRECISION MEDICINE: SHARING AND REUSING DATA, *C. PARRA-CALDERÓN*
PERSONALISED MEDICINE AND CARDIOVASCULAR DISEASE, *D. MUNDRA*
LEVERAGING ADVANCED METHODS TO EVALUATE AI-PHARMA COMPANIES, *M. COLANGELO & D. KAMINSKIY*

EUROSON 2019 WELCOMES
WORLD OF ULTRASOUND,
P. SIDHU

BREXIT MEANS BREXIT:
RADIOLOGISTS WITHOUT
BORDERS, *V. PAPALOIS*

FIGHTING CYBER THREATS
WITH A GLOBAL COMMUNITY,
D. ANDERSON

WHEN DOES STRIKING OUT ALONE
WORK BEST? *D. MICHAELIDES*

VALUE-ORIENTED MANAGEMENT,
W. VON EIFF

SEX AND GENDER IN MEDICINE,
*N. KUMAR & T. ROHR-
KIRCHGRABER*

SECRETS OF INNOVATION
SUCCESS, *N. HENKE & R.
BARTLETT*

NEW HOSPITAL POLICIES AND
PROCEDURES REQUIRED FOR
PATIENT SAFETY, *M. RAMSAY*

PEOPLE POWERED HEALTH
MOVEMENT FOR PATIENTS,
L. THOMPSON

HEALTHCARE AND INDUSTRY
PARTNER FOR TECH INNOVATION,
A. FREJD

NURSING ON THE MOVE:
CROSS-BORDER HIRING,
I. MEYENBURG-ALTWARG



People Powered Health Movement for patients

The People Powered Health Movement is ignited by Accreditation Canada (AC) and the newly created Health Standards Organization (HSO) and has a bold ambition of achieving quality health services for all. This interview was conducted with Leslee J. Thompson during the International Patient Experience Symposium in Abu Dhabi.

Health Standards Organization (HSO) was created to spearhead a global movement designed to improve and save lives by using and implementing the best standards, applying innovative tools and capitalising on leading expertise from around the world. Accreditation Canada is an affiliate of HSO and aims to deliver objective, credible and outcome-oriented assessment programmes based on the best standards to empower providers to focus on what really matters. In simple words, both HSO and Accreditation Canada are on a quality improvement journey working with patients and their families, practitioners, and policy-makers.

Leslee J. Thompson is the CEO of Health Standards Organization (HSO) & Accreditation Canada and is also the driving force behind the People Powered Health Movement. The goal of this movement is to unleash the power and potential of people around the world who share their passion for achieving quality services for all. Leslee is a leader who is used to making things happen. She has 25 years of experience that spans multiple geographies and sectors including healthcare, medical technology, government, and retail. She has been Board Chair of the Canadian Foundation for Healthcare Improvement, Chair of Council of Academic Hospital Ontario, Assistant Professor at Queen's University and a member of Ontario Health Innovation Council. Other honours include being an Executive in Residence at Rotman School of Management, University of Toronto, Canada as well as being named one of Canada's Top 100 Most Powerful Women. Leslee shares her thoughts with HealthManagement.org about the People Powered Health Movement, the influence of hospital accreditation on

hospital management, and establishing an optimal patient experience.

Tell us something about the People Powered Health Movement. How would this impact patient experience?

The health care paradigm is shifting toward the design and delivery of people-centred care where patients and their families are valued, respected and acknowledged as equal members of health care teams and as key partners in their care. The most successful health systems that deliver high-quality care outcomes are ones that are co-designed with people at all levels of the system: front line staff, patients, families, providers, and decision-makers who work together to actively produce high-quality outcomes that are centred around the needs of the patient.

People are at the center of everything we do. People Powered Health is about the right people coming together to build better health systems around the world. When you make sure that all stakeholders involved in the health system listen and collaborate based on mutual understanding and a common purpose, patients have better health experiences, from improved quality, safer care, reduced hospital visits, better outcomes, and lower system costs.

How does hospital accreditation influence quality and hospital management? Are there any guidelines/policies governing the implementation of patient experience measurement tools for healthcare providers?

Ongoing quality improvement is at the core of our accreditation programme. Participating in



Leslee J. Thompson

CEO
Accreditation Canada & Health
Standards Organization
Ottawa, Canada

Leslee.Thompson@health-standards.org

[@Leslee_Thompson](https://twitter.com/Leslee_Thompson)

accreditation helps to shine a light on how an organisation can maximise quality and patient safety. Accreditation Canada assists organisations through the accreditation process and helps them identify where they can improve both before their survey and throughout their accreditation cycle. The on-site survey itself provides peer-to-peer coaching and gives insight on what an organisation is doing well and where there might be room for improvement. Hospital management is directly influenced by this exercise as their organisation strives to meet the criteria outlined in the standards. The accreditation program also contains specific standards for leadership and governance that ensure leaders put in place the right policies and procedures for quality and safety.

“PEOPLE POWERED HEALTH IS ABOUT THE RIGHT PEOPLE COMING TOGETHER TO BUILD BETTER HEALTH SYSTEMS AROUND THE WORLD”

The standards used to evaluate organisations are based on best practices and are co-designed by committees who have expertise in the area covered by the standards with representation from key stakeholder groups, including the “lived experience experts” (ie patients, clients, residents, families, etc).

In our Qmentum International Standard on Leadership, for example, we require that organisations use the Hospital Survey on Patient Safety Culture Instrument, which monitors client safety culture to determine an organisation’s commitment to client safety and to push the needle forward on client-centred services. We also ensure that leaders develop and implement an integrated quality improvement plan, which helps organisations understand the system from the client’s experience. All of this comes back to normalising patient and family co-design for a better and safer patient experience.

What are some of the challenges in establishing an optimal patient experience across an organisation?

One challenge in establishing an optimal patient experience is the attitudinal shift and change behaviours needed to embrace patients and families

as “lived experts” who can contribute valuable insight about the gaps in services and care and to co-designing successful solutions. They see things that you might not when they’re sitting in the waiting chair. It just makes sense to ask the patient and/or family member what can change to improve the patient experience.

In terms of collaborating with patients and families, some of the challenges we have heard include patients feeling excluded because they don’t “speak the same language” as health professionals. It’s critical to ensure that patients feel like they belong at the table and that their lived experience can help organisations co-design better health care. Another challenge is ensuring the diversity of patient voices being heard. Engagement processes often require time and resources that not every patient can afford. In order to minimise barriers to full participation from patients in diverse demographics, we are currently working towards a policy to compensate patients and families on technical committees to encourage more participation and to appreciate their contributions.

What is the importance of establishing supportive structures and mechanisms for patient partnership?

If patient partners show up to a co-design meeting and are engaged with as you would with a researcher, caregiver or policymaker, there is a good chance you won’t all be “speaking the same language.” Most patients haven’t taken years of health education or worked in the industry. Consequently, patients might not feel comfortable engaging and sharing key insights that could give your team a deeper understanding of how to improve.

Establishing a supportive structure for onboarding and working with patients and families will result in deeper learning that you can use to improve quality and patient safety. We have worked with our patient partnership office to create purposeful roles for patients who work on our technical committees and on surveys, but simply establishing these structures isn’t enough. Once roles are (wherever possible) co-designed with patients and staff, it is important to monitor their experiences. Do patients feel supported? Are they contributing? What can we do to help? Continuous listening and evolving the patient role will benefit everyone involved. It’s not just one role where they can help; it’s about having a process where you can integrate the patient voice into your organisational practices. ■