



Patient Voices & Psychological Safety Video Focus Group FINAL REPORT

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Executive Summary

Dr. Lawrence Yang, the Doctors of British Columbia physician representative for the Fraser Regional Physician Health & Safety Working Group, on a volunteer basis, held an online focus group with three patient partners in Fraser Health on the topic of “psychological safety in healthcare”. The patients were interested in sharing the discussion with a wide audience including health professionals and a short edit is available on YouTube at this [link](#).

The leveraging of multi-media for communications around important topics like psychological safety should continue. The inclusion of patient partners in improving healthcare is critical to all future health system improvement strategies.

Background

In British Columbia, April of 2019, the Ministry of Health, Health Authorities, and Doctors of BC signed a Memorandum of Agreement (MOA). The MOA set in motion a commitment of funding for staff, projects and physician representatives amongst other infrastructure for the moving forward of projects to improve the physical and psychological safety of all health professionals in British Columbia with a focus on physicians - recognizing the lack of historical infrastructure for this group.

The contextual factors impeding psychological safety in the workplace include decades of pre-existing over-work in physician cultures, a culture of martyrdom, a culture of harsh inner-critics from perfectionists entering into training in the health professions, as well as the added stresses of a distressing pandemic.

In Fraser Health, Dr. Yang, as physician representative, recognized that many of his colleagues had not had the privileges of spending time with literature regarding “psychological safety” and how to actualize it nor how it pertains to clinical work and to good health outcomes. Indeed psychological safety and the generation of same did not seem to be in the common lexicon of Dr. Yang’s colleagues in hospital work, operating room suites, nor primary care. Dr. Yang recognized that all physicians really did seem to care about meeting the needs of their patients. Dr. Yang saw psychological safety as a descriptor of an ideal cultural milieu for innovation within a team, where every team member feels encouraged to contribute their diverse talents and ideas to teamwork. Dr. Yang sees psychological safety, if facilitated, as having the potential for improving the human experience of all involved in healthcare as well as improving health outcomes in the community.

Following principles of health system’s improvement and recognizing “the people side of change” (change psychology), Dr. Yang felt that bringing in the voice of end-users of the health system may be helpful in setting up some conditions for a shift in healthcare culture.



Methods

Dr. Yang reached out to the Patient Voices Network, a network of patient partners hosted by the BC Patient Safety and Quality Council and through the help of Jami Brown, recruited three patient voices for a recorded focus group on the topic of psychological safety in healthcare. Dr. Yang's gestalt of the physician climate was that his colleagues were inundated with reading material and he felt that leveraging new media (YouTube video) might be helpful in reaching the audience of his peers - his colleagues in the hospital and clinics.

Dr. Yang's time and the patients' time for this project was all on a volunteer basis.

Outcome

The patients agreed to have the conversation recorded and shared on YouTube. Dr. Yang and the three patients from different backgrounds spoke of:

- Their challenges with healthcare
- Their perspectives of what psychological safety is
- Why psychological safety is important to them as patients
- The possible benefits of psychological safety for members of their health teams

Some of the ideas highlighted by the patient voices include:

1. If our healthcare teams had more psychological safety, the patient experience of care would likely improve
2. If our healthcare teams had more psychological safety, the patient's sense of security during the course of their treatment would improve
3. If our healthcare teams had more psychological safety, the patients would have a greater likelihood of trusting their health professionals
4. If our healthcare teams had more psychological safety, despite the intensity of the demands on them, the health professional's experience of work would likely improve - they might have an increased sense of well-being
5. Health systems currently do not feel psychologically safe, often are actually traumatizing with all of the patient voices experiencing psychologically distressing experiences in the context of healthcare
6. Patients feel at times very vulnerable in our health system, especially when they are medicated or physically incapable of being vigilant on their own
7. Healthcare staff seem to be overwhelmed with work from the patient perspective
8. Our healthcare teams give the impression that they do not talk to each other, patient stories are not passed on between siloed teams - communication must improve between teams and patients and patient families
9. Healthcare team members rarely feel "present" with patients, it feels like they are always trying to complete the next task - and because of this, they miss important information (undesired reactions to treatment)
10. Patients need more psychological safety, patients feel like care team members do not trust patients

11. There is a sense that healthcare is not patient-centred nor family-centred, and more budget centred
12. Patients expect that the system should be leveraging technology much better to communicate patient histories and patient medication profiles
13. Racial Inequities are still making patients feel unsafe
14. Children's hospital and Children's hospice is a fantastic bright spot to learn from around psychological safety
15. Doctors need training in implicit bias
16. Patients expect better hospitality in hospitals
17. Adult patients have similar needs for psychological safety relative to pediatric care
18. Doctors and nurses need training on how to respond to patient's suffering and emotions, they need to be more present, and have more tolerance for emotional challenges
19. Patients are not given enough orientation to what is happening to them and this results in lack of psychological safety for the patients
20. If psychological safety is a priority, patients will trust the health system more and things will be smoother

The focus group discussion was conducted in May of 2021 ended up lasting nearly 2 hours and the entirety of the discussion is available on [YouTube](#).

The shorter trailer version, which is less than 5 minutes, can be viewed at the link in the Executive Summary.

Recommendations

The YouTube link may be shared with any audience that may be interested in including health professionals embarking on a learning journey around psychological safety, why it is important, and how to facilitate safety in healthcare teams.

There is so much to learn from patient partners who are eloquent and sharing parts of their journeys as end-users of our health systems.