## Patients' Perspectives of Engagement as a Safety Strategy

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Purpose/Objectives: To describe patient engagement as a safety strategy from the perspective of hospitalized surgical patients with cancer.

Research Approach: Qualitative, descriptive approach using grounded theory.

Setting: Memorial Sloan Kettering Cancer Center in New York, New York.

Participants: 13 hospitalized surgical patients with cancer.

Methodologic Approach: Grounded theory with maximum variation sampling.

Findings: Participants' perceptions regarding their engagement as a patient safety strategy were expressed through three overarching themes: the word "patient" obscures the message, safety is a shared responsibility, and involvement in safety is a right. Themes were further defined by eight subthemes.

Conclusions: Using direct messaging, such as "your safety" as opposed to "patient safety," and teaching patients specific behaviors to maintain their safety appeared to facilitate patient engagement and increase awareness of safety issues. Patients may be willing to accept some responsibility for ensuring their safety by engaging in behaviors that are intuitive or that they are clearly instructed to do; however, they described their involvement in their safety as a right, not an obligation.

Interpretation: Clear, inviting, multimodal communication appears to have the greatest potential to enhance patients' engagement in their safety. Nurses' ongoing assessment of patients' ability to engage is critical insofar as it provides the opportunity to encourage engagement without placing undue burden on them. By employing communication techniques that consider patients' perspectives, nurses can support patient engagement.

ore than 15 years after the seminal Institute of Medicine (2000) report *To Err Is Human: Building a Safer Health System* identified iatrogenic events as a leading cause of death among Americans, patient safety continues to pose a challenge to the U.S. healthcare system (National Patient Safety Foundation [NPSF], 2015). One of the most prominent initiatives that spawned from the patient safety movement has been the drive for patient engagement as a patient safety strategy (Doherty & Stravropoulou, 2012; NPSF Lucian Leape Institute, 2014; Schwappach, 2010; Severinsson & Holm, 2015; Wright et al., 2016). This trend, described as the "What can patients do to prevent medical mistakes?" movement (Wachter, 2010), continues to be fueled by the support of thought leaders and regulatory bodies alike (Joint Commission, 2016; NPSF Lucian Leape Institute, 2014).

Evidence suggests that most patients are willing to engage and capable of engaging in actions recommended by various patient safety organizations, such as asking questions, providing information, and reporting when their safety has been compromised (Berger, Flickinger, Pfoh, Martinez, & Dy, 2014; Davis, Sevdalis, &