



Building a Culture of Safety utilizing the Patient Safety Structural Measure (PSSM) Domain Series: Patient and Family Engagement

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Housekeeping



- Who's in the room today? (Name, organization, role)
- To eliminate any background noise during today's presentation your audio has been muted upon entry.
- We encourage questions and open discussion through the Chat box, or you can raise your hand to be unmuted and engage verbally.
- This event is being recorded.

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Introducing



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Objectives



1. Highlight the role of patients and families in enhancing safety.
2. Explore strategies for effective patient and family engagement in safety initiatives
3. Discuss the benefits of creating Patient and Family Advisory Groups

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CMS PSSM Review



The Patient Safety Structural Measure (PSSM)

<https://qualitynet.cms.gov/pch/measures/safety>

NATIONAL
ACTION
ALLIANCE
for Patient and
Workforce Safety

 Leadership Commitment to Eliminating Preventable Harm	 Strategic Planning and Organizational Policy	 Culture of Safety and Learning Systems	 Accountability & Transparency	 Patient & Family Engagement
Our hospital leaders, including C-suite executives, place patient safety as a core institutional value. Plans and metrics are widely shared across the hospital and governing board^a ✓ C-suite oversees safety self-assessment Governing board ensures adequate resources to support patient safety Notification of serious safety events to C-suite executives and BoD members within 3 business days	Commitment to "zero preventable harm" Hospital requires implementation of patient safety competencies for all Hospital has action plan for workforce safety Written just culture policy to that balances no blame and appropriate accountability	Hospital conducts hospital-wide culture of safety survey Our hospital implements at least 4 High Reliability Organization Practices ✓ Hospital implements team communication training Hospital participates in large-scale learning network(s) for patient safety	Hospital works with PSO listed by AHRQ to carry out patient safety activities Hospital has a Communication and Resolution Program (CRP), such as AHRQ's CANDOR toolkit Hospital measures CRP program performance	Hospital has Patient and Family Advisory Council (PFAC) that provides input on safety-related activities Patients have comprehensive access to medical records via patient portals. Hospital provides support and allows patients to submit comments for potential correction to their record Hospital supports the presence of family (as defined by the patient) as members of the care team

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Ins and Outs of Attesting

- **Critical Care Hospitals are not required to participate**
- **Submission in the affirmative**
- **If multiple hospitals report under same CCN means all all hospitals attest “yes”**
- **25 elements across 5 domains, with each domain representing one point towards a total score of 0-5**
 - No partial credit within a domain
- **Attestation will be reported through NHSN-Spring 2026**
- **Results available on Care Compare Website-Fall 2026**

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Patient Safety Structural Measure Quick Reference

Hospital Inpatient Quality Reporting (IQR) Program
Prospective Payment System-exempt Cancer Hospital Quality Reporting (PCHQR) Program
Patient Safety Structural Measure Quick Reference Guide

Patient Safety Structural Measure Attestation	Data Submission for the CY 2025 Reporting Period
• The measure is comprised of a set of complementary attestation statements that aim to capture actions that advance safety practices and outcomes. These attestations are organized into five priority domains: ◦ Leadership Commitment to Eliminating Preventable Harm ◦ Strategic Planning and Organizational Policy ◦ Culture of Safety and Learning Health Systems ◦ Accountability and Transparency ◦ Patient and Family Engagement • Each of the five domains include five attestation statements that a hospital must respond to. • A hospital will evaluate and determine whether it engaged in all the statements that comprise a domain. If a facility can attest “Yes” at any time during the applicable reporting period (January 1 through December 31), it would satisfy the requirement for a domain. A hospital is not able to receive partial points for a domain. • If a hospital is comprised of more than one acute care hospital facility under one CMS Certification Number (CCN), all facilities sharing the same CCN will need to satisfy domain criteria for a positive (i.e., “Yes”) attestation. • For the full list of attestation statements and additional resources, please refer to the Patient Safety Structural Measure specifications and attestation guide documents on QualityNet.	• For the calendar year (CY) 2025 reporting period, the measurement period is from January 1, 2025, through December 31, 2025. • Reporting compliance will impact the fiscal year (FY) 2027 payment determination for the Hospital IQR Program and the FY 2027 program year for the PCHQR Program. • The data submission period for both programs will take place between April 1 through May 15, 2026. • The attestation is completed once annually using the data submission and reporting standard procedures set forth by the Centers for Disease Control and Prevention through the National Healthcare Safety Network (NHSN). • The NHSN website will provide more details closer to the initial data submission period. • Hospitals are strongly encouraged to have at least two staff with access to the NHSN system to ensure the ability to submit data.
	Public Reporting • CMS will publicly display the hospital's measure performance score, which would range from 0 to 5 points, on an annual basis. • CY 2025 performance scores will display on the Compare tool on Medicare.gov (for the Hospital IQR Program) and the Provider Data Catalog (for the PCHQR Program), beginning fall 2026.

[PSSMQuickRef](#)
[GuideFy2027](#)

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Patient and Family Engagement Domain 5



The effective and equitable engagement of patients, families, and caregivers is essential to safer, better care.

Hospitals must embed patients, families, and caregivers as co-producers of safety and health through meaningful involvement in safety activities, quality improvement, and oversight.

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Why Patient and Family Engagement?



- Embeds **patients and families as partners** in safety and care delivery
- Promotes **shared decision-making** and respect for patient preferences
- Involves patients/families in **safety event reporting and improvement efforts**
- Supports **transparency, communication, and trust** at all levels of care
- Encourages use of tools and policies that enable **active participation**
- **✦ Objective:** To create a culture where patients and families are empowered to contribute to safe, person-centered care.

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Polling Question 1



1. Does your hospital have an active Patient Family Advisory Council (PFAC)?
2. If no, do you plan on starting one yet this year?

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Patient and Family Engagement Element 1



Our hospital has a Patient and Family Advisory Council (PFAC) that ensures patient, family, caregiver, and community input to safety-related activities, including representation at board meetings, consultation on safety goal-setting and metrics, and participation in safety improvement initiatives

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Board Leaders



- Board and executive leaders **prioritize patient and family engagement (PFE)** as a strategic focus.
- Leadership should ensure policies reflect **patient-centered values** and include patients/families in organizational planning.
- Consider how your hospital **formalizes leadership commitment** (e.g., inclusion in strategic plans, board reports).

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Patient and Family Engagement Element 1 (cont'd)



Group Discussion



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Polling Question 2



Can you attest?

Element One:

Our hospital has a Patient and Family Advisory Council (PFAC) that ensures patient, family, caregiver, and community input to safety-related activities, including representation at board meetings, consultation on safety goal-setting and metrics, and participation in safety improvement initiatives

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Patient and Family Engagement Element 2



Our hospital's PFAC includes patients and caregivers of patients who are diverse and representative of the patient population

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Patient and Family Engagement Element 2 (cont'd)



- Commitment to Equity and Inclusion
- Reflective of Our Community
- Enhancing Cultural Competence
- Improving Patient Experience and Outcomes
- Inclusion in Decision-Making
- Strengthening Trust and Engagement
- Ongoing Recruitment and Support

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Patient and Family Engagement Element 2 (cont'd)



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Polling Question 3



Can you attest?

Element 2:

Our hospital's PFAC includes patients and caregivers of patients who are diverse and representative of the patient population

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Patient and Family Engagement Element 3



Patients have comprehensive access to and are encouraged to view their own medical records and clinician notes via patient portals and other options, and the hospital provides support to help patients interpret information that is culturally-and linguistically-appropriate as well as submit comments for potential correction to their record

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Patient and Family Engagement Element 3 (cont'd)



- Transparency
- Accessible Patient Portals
- Multiple Access Options
- Support for Understanding Medical Information
- Promoting Health Equity
- Encouraging Feedback and Correction
- Patient-Centered Care in Action

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Patient and Family Engagement Element 3 Continued



Group Discussion



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Polling Question 4



Can you attest?

Element 3:

Patients have comprehensive access to and are encouraged to view their own medical records and clinician notes via patient portals and other options, and the hospital provides support to help patients interpreting information that is culturally-and linguistically-appropriate as well as submit comments for potential correction to their record

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Patient and Family Engagement Element 4



Our hospital incorporates patient and caregiver input about patient safety events or issues (such as patient submission of safety events, safety signals from patient complaints or other patient experience data, or patient reports of discrimination).

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Incorporating Patient and Caregiver Input into Patient Safety



- Patients and caregivers can submit safety concerns via portals, surveys, or direct reports
- Data sources include complaints, grievances, and discrimination reports
- Reports are reviewed and integrated into safety and quality systems
- Feedback is provided to patients when their input results in action
- Discrimination and equity concerns are escalated and addressed
- Insights are used to drive safety improvements and staff education
- Supports a culture of transparency and shared responsibility

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Patient and Family Engagement Element 4 (cont'd)



Group Discussion



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Polling Question 5



Can you attest?

Element 4:

Patients have comprehensive access to and are encouraged to view their own medical records and clinician notes via patient portals and other options, and the hospital provides support to help patients interpreting information that is culturally-and linguistically-appropriate as well as submit comments for potential correction to their record

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Patient and Family Engagement Element 5



Our hospital supports the presence of family and other designated persons (as defined by the patient) as essential members of a safe care team, and encourages engagement in activities such as bedside rounding and shift reporting, discharge planning, and visitation 24 hours a day, as feasible.

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Family members



- We support the presence of family and other designated persons (as defined by the patient) as essential members of a safe care team
- We support the family
- 24/7 presence encouraged, as feasible and appropriate
- Included in bedside rounding, shift report, and discharge planning
- Enhances safety, communication, and continuity of care
- Supports diverse and culturally-defined family structures
- Backed by hospital policy, training, and infrastructure

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Patient and Family Engagement Element 5 (cont'd)



Group Discussion



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Polling Question 6



Can you attest?

Element 5

Our hospital supports the presence of family and other designated persons (as defined by the patient) as essential members of a safe care team, and encourages engagement in activities such as bedside rounding and shift reporting, discharge planning, and visitation 24 hours a day, as feasible.

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Conclusion



Call to Action:

1. Do a self-assessment (if not completed already) and begin to prioritize goals to be able to positively attest to the PSSM
2. Prioritize your opportunities for improvement
3. Get started on improvement projects that will lead to allowing you to attest,
4. Don't try to do it all at one time. One bite at a time!
5. Celebrate your successes
6. Tell your story

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Resource Links



- [Leading a Culture of Safety Blueprint.pdf](#)
- [NHS England » Safety culture: learning from best practice](#)
- [Sentinel Event Alert Issue 60, Dec. 11, 2018 Quick Start Guide: Patient Safety Structural Measure](#)
- [Hospital Inpatient Quality Reporting \(IQR\) Program Measures](#)
- [New CMS Measure Aims to Advance Safety | Institute for Healthcare Improvement](#)
- [AHA brief: The Board's Role in Quality and Patient Safety | AHA News](#)
- [Transforming Safety with the CMS PSSM & National Action Plan Webinar | Institute for Healthcare Improvement](#)
- [Leadership Guide to Patient Safety | Institute for Healthcare Improvement](#) (includes a self-assessment tool)

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Resource Links: Domain 1



- [The Incident Decision Tree: Guidelines for Action Following Patient Safety Incidents](#)
- [About the CUSP Method | Agency for Healthcare Research and Quality](#)
- [TeamSTEPPS 3.0 | Agency for Healthcare Research and Quality](#)
- [Workforce and Workplace Violence Prevention | AHA](#)
- [AONL-ENA workplace guiding principles.pdf](#)
- <https://hqin.org/resource/health-equity-action-plan/>

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Resource Links: Domain 2



- [Patient Safety | Institute for Healthcare Improvement](#)
- [Healthy Work Design and Well-Being Program | NIOSH Research Programs | CDC](#)
- [CDC's Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings | Infection Control | CDC](#)
- [Microsoft Word - Just Culture Toolkit Final](#)
- [Healthcare Safety Competencies Affinity Group | Agency for Healthcare Research and Quality](#)

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Resource Links: Domain 3



- [SOPS Hospital Survey | Agency for Healthcare Research and Quality](#)
- [Improving Patient Safety in Hospitals: A Resource List for Users of the AHRQ Hospital Survey on Patient Safety Culture](#)
- [Five Whys Worksheet | HQIN](#)
- [High Reliability Practices for Daily Huddles](#)
- [RCA2: Improving Root Cause Analyses and Actions to P](#)
- [Huddle Quick Start Guide | HQINrevent Harm | Institute for Healthcare Improvement](#)

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Resource Links: Domain 4



- [Home | PSO](#)
- [Visual Management Board Component Kit | Agency for Healthcare Research and Quality](#)
- [The Michigan Model: Medical Malpractice and Patient Safety at Michigan Medicine | University of Michigan Health](#)
- [Communication and Optimal Resolution \(CANDOR\) | Agency for Healthcare Research and Quality](#)
- [Introduction to Communication and Optimal Resolution \(CANDOR\): Video | Agency for Healthcare Research and Quality](#)

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Resource Links: Domain 5



- [\[aroadmapforhospitalsfinalversion727pdf.pdf\]\(#\)](#)
- [Patient and Family Advisory Councils: Resources for the Field | AHA](#)
- [Simple Strategies for Establishing a Patient and Family Advisory Council \(PFAC\) | HQIN](#)
- [Culturally and Linguistically Appropriate Services \(CLAS\) Action Plan | HQIN](#)
- [<https://www.ahrq.gov/patient-safety/pfe/index.html>](#)
- [Person and Family Engagement \(PFE\) Implementation Guide for Hospitals](#)
- [Guide to Patient and Family Engagement in Hospital Quality and Safety | Agency for Healthcare Research and Quality](#)

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Resource Links: Domain 6



- [Guide for Developing a Community-Based Patient Safety Advisory Council | Agency for Healthcare Research and Quality](#)
- [Patient and Family Advisory Councils \(PFAC\): Provide Patient-Centered Care by Leveraging the Role of PFACs in Your Organization | Leading Change | AMA STEPS Forward | AMA Ed Hub](#)
- [Institute for Patient and Family-Centered Care](#)
- [Our Work — PFCCpartners](#)

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Upcoming Events



- + **Compass Sharing Progress, Amplifying Resources and Knowledge (SPARK) Call**
 - August 20, 2025
 - 1:00-1:30PM CT
 - [Registration](#)
- **Compass SHARP Lunch and Learns**
 - Second Wednesday of each month, August-November 2025, from 12:10-12:50PM
 - Approved for 0.5 CME
 - [Registration](#)
- **Compass Patient Safety Conference**
 - September 9-10, 2025, at the Meadows Events & Conference Center in Altoona Iowa
 - Early bird special ends August 15th
 - [Details](#)

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In Person Flex District Meetings

District A Meeting

August 26, 2025, 10:00AM - 2:30PM CT
Cherokee Regional Medical Center
300 Sioux Valley Dr, Cherokee, IA 51012

[Registration](#)

District B Meeting

August 19, 2025, 10:00AM - 2:30PM CT
Waverly County Health Center
312 9th Street SW, Waverly, IA 50677

[Registration](#)

+ District A [Registration](#)

+ District B [Registration](#)

District C Meeting

August 20, 2025, 10:00AM - 2:30PM CT
Monroe County Hospital
6580 165th Street, Albia, IA 52531

[Registration](#)

District D Meeting

August 28, 2025, 10:00AM - 2:30PM CT
Cass County Memorial Hospital
1501 East 10th St, Atlantic, IA 50022

[Registration](#)

+ District C [Registration](#)

+ District D [Registration](#)

For those registered, you are eligible to get \$50 off the Compass Patient Safety Conference – please email Charisse for the code (coulombec@compasshcc.org)



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iCompass Academy



- This webinar will be recorded and will be available on iCompass Academy
- What is iCompass Academy?
 - iCompass Academy offers an online suite of free eLearning products, including webinars, courses, and virtual events that can be accessed anywhere at any time.



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- We encourage you all to also join us on our communication platform, iCompass.
- iCompass is a free online forum designed to share information throughout the entire industry and bring people together to drive sustainable healthcare transformation.



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Thank you for joining us!



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