

Patient and public involvement for quality at the hospital level: from ambiguous objectives to organizational robustness

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1. Introduction

Patient and public involvement (PPI) has become a major method for improving healthcare, healthcare services and healthcare policies. At hospital level, PPI remains poorly implemented. When PPI initiatives are taken, doubts remain as to their realization due to the ambiguity of their objectives. Most of the literature focuses on the values that drive the PPI or the performance that PPI achieves. We propose to analyze the operation and function of a specific PPI initiative. The aim of this research is to identify the effective contribution of PPI to the hospital system.

2. Theoretical background

The analysis built on Luhmanian system’s theory (N.Luhmann, 2010, 2021). Three key points are worth recalling here. Firstly, the luhmannian systems’ theory move away from a distinction between totality and parts towards a distinction between system and environment. Secondly, social systems are operationally closed. They can only refer to elements of the system. Thirdly, social systems have boundaries. From this perspective, communication always refers to one and only social system. Thus, communication operates as a differentiation process between all the possible social systems hided behind the supposed entity of « one hospital ».

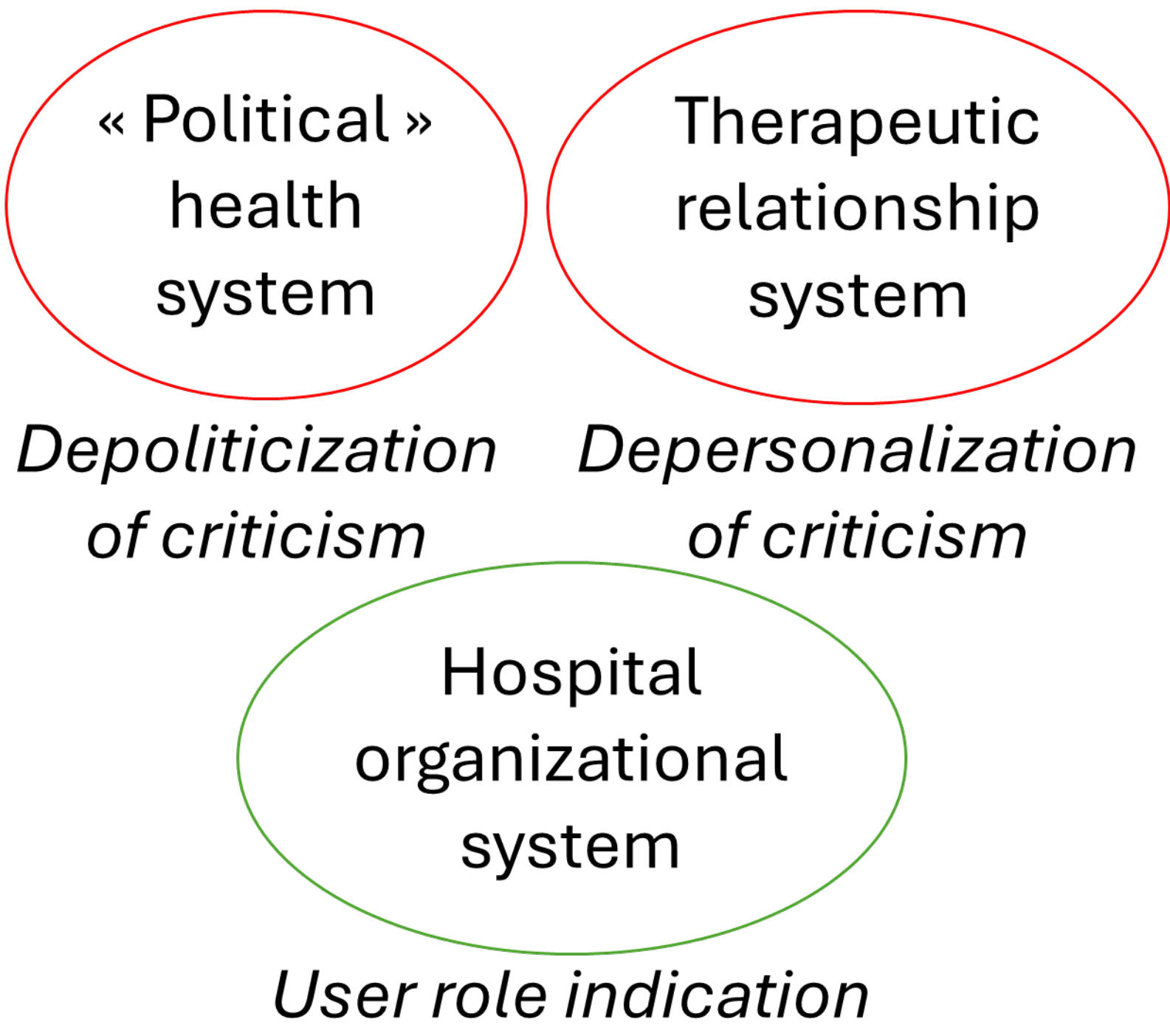
3. Methods

Qualitative multi-site case study (Yin, 2009)
Case choosen: Patient and Family Advisory Councils (PFACs)

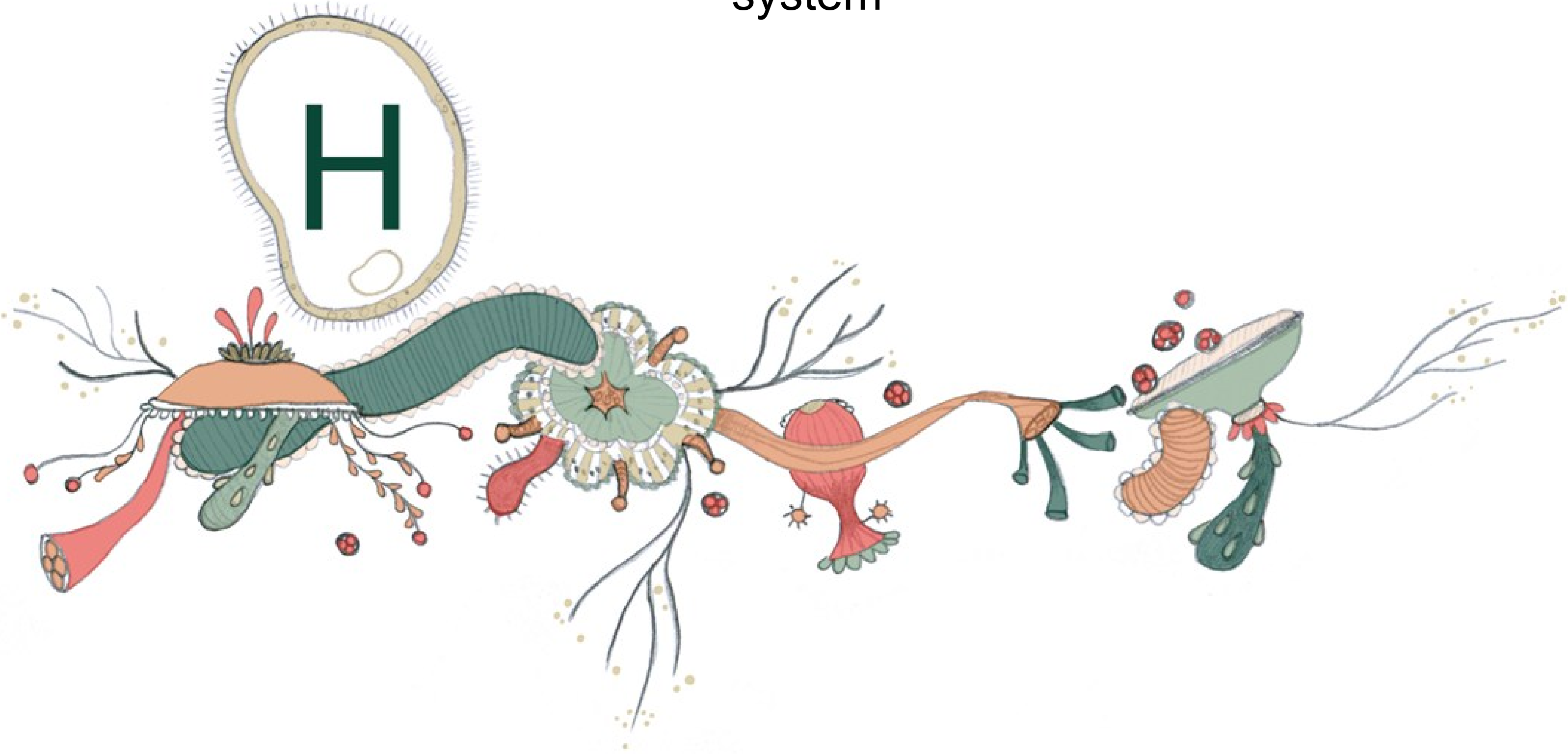
Sites	1	2	3	Total
Start of fieldwork	Dec 2018	Nov 2018	Janv 2023	
Leaving the field	Jun 2022	Mar 2022	Febr 2024	
Number of interviews (<i>patient members– professional members – peripheral professionals</i>)	14 (4-7-3)	12 (4-3-5)	6 (0-6-0)	32
Number of observation sessions	12	6	5	23
Number of documents collected				More than 80

4. Results

4.1. Central process: Sorting operations for irritations



4.2. Realization of the immune function of the hospital organizational system



5. Discussion

PFACs, as cases of PPI for quality at hospital level, pave the way for organizational robustness (Xie et al, 2023; Hamant, 2024). Strengthening these initiatives would benefit from further consideration of the following points:

- Identify the “appropriate” or “relevant” boundaries on which to work.
- Enable intra-system integration of PPI subsystems.
- Propose innovative ways to evaluate these initiatives and their contribution to organizational robustness.

Organizational robustness (Xie et al., 2023)		Patient and Family Advisory councils
System	An entity	Hospital organization
Effectivity	Must continue to perform its functions	Pursue the communication of its human-face organization self-decription
Perturbation	Despite external or internal factors	Misunderstandings, criticisms, dissatisfactions
Environment	From a given environment	Undifferentiated users