## Building the business, legal and quality case

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In securing support for organizational initiatives, competition usually exists for scarce resources. Thus, a robust case for undertaking a particular initiative has to be created and shared with key individuals. One approach that offers rationale to address broad concerns is to build the BLQ case – or the business, legal and quality case. To examine how this framework can work, I'll use the example of proposing an increased focus on person and family-centered care (PFCC) which is drawn from an actual strategic planning session that occurred in Fall 2017 at a major medical center in the Midwest.

The *business* case addresses the financial, resource and strategic considerations for the change. Data can include cost savings, reduced resource utilization, increased productivity, reduced operating costs, employee retention (which can lead to reduced onboarding and orientation expenses), increased market share (which can be translated into competitive advantage) and decreased malpractice costs. In the scenario with PFCC, concrete examples from the literature of where and how organizations benefitted from introducing, or strengthening, PFCC were shared. Additionally, using an industry leader to describe the business benefits of this approach was helpful. In this case, the American Hospital Association had identified five business reasons for why hospitals should pursue a PFCC strategy (2013):

- Contributes to better clinical outcomes
- Reduces costs of care, at both the individual and institutional levels
- By personalizing care, increases the likelihood of adherence to recommended treatment regiments, leading to fewer complications and re-hospitalizations
- Additionally, as patient satisfaction improves, reimbursement rates from Medicare and other payers can improve
- Fosters compliance with patient engagement requirements that can positively affect reimbursement

For the *legal* case, specific wording from the standards or guidelines of relevant organizations can highlight the need for a particular change. In health care, regulatory agencies are increasingly including requirements related to patient and family involvement. Within the health care delivery arena and PFCC, examples include the Joint Commission, the Centers for Medicare and Medicaid Services, state quality improvement organizations, and state and federal agencies. Depending on the recommendation(s) being put forward, specific organizations and agencies need to be identified and their requirements used to support the need for the proposed change.

For the *quality* case, persuasive support could come from a wide range of directions. Feedback from employees, patients and families, or community partners could amplify the need for recommended changes. As a particular recommendation is advanced, the improved benefits to

key metrics to be achieved can be identified and measured. In addition, there may be recognition programs whose designation would be positive for the organization, such as the Baldrige Award, the AHA-McKesson Award for Quality or the Magnet Recognition program for initiatives in health care. In the case of PFCC, enhanced community perception of the quality and personalized care to be achieved was a great motivator for the medical center noted above.

In conclusion, support for recommended change has to be broad and address a number of concerns. Different arguments will work better with organizational leaders who represent different constituencies. This example was selected to demonstrate that even highly qualitative initiatives such as moving toward PFCC can be quantitatively and persuasively argued. Using a business, legal and quality framework to build a case heightens the possibility of success. Of particular importance in building any case is that the leader needs to use the language and context relevant to the individual organization's priorities.

American Hospital Association (2013). *A leadership resource for patient and family engagement strategies*. Chicago IL: Health Research & Educational Trust.