

PATIENT SAFETY MOVEMENT

First, Do No Harm. ZERO by 2030

Core messages from the 5th Global Ministerial Summit on Patient Safety – 2023 – and the



Patient Safety

5th Global Ministerial Summit 2023
23rd - 24th February 2023, Montreux, Switzerland

Anthony Staines, Ph.D.

Newport Beach, California – June 2, 2023



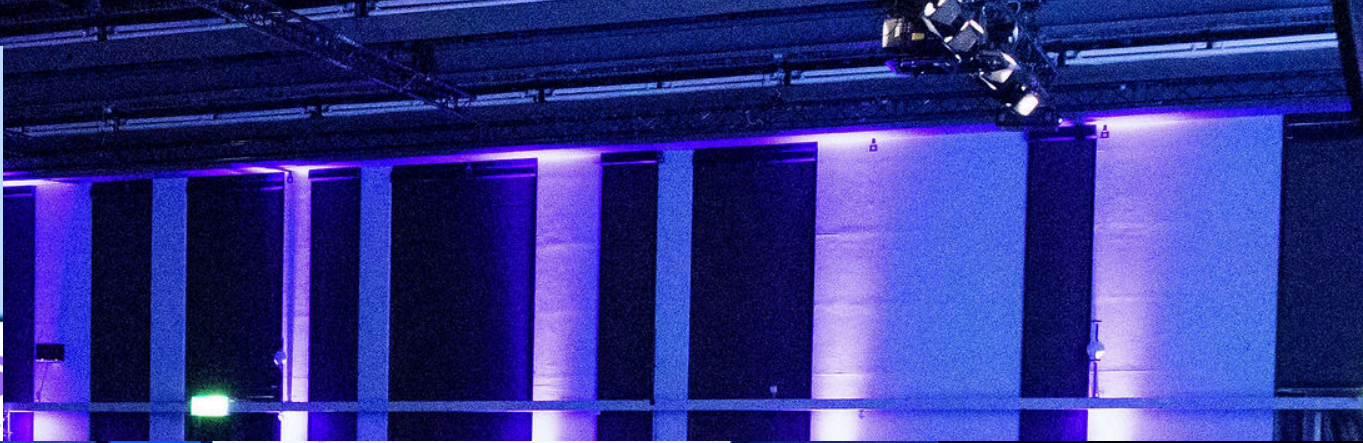
Patient Safety
Global Ministerial Summit 2023
23rd - 24th February 2023, Montreux, Switzerland



Patient Safety



Patient Safety
5th Global Ministerial Summit
23rd - 24th February 2023, Montreux, Switzerland



09:20h-10:10h: Crisis Simulation
10:10h-10:50h: Minister Photo & Coffee Break
10:50h-11:20h: Panel of Summit Host Countries - Progress and Challenges in Patient Safety - Experiences with the Global Ministerial Summit on Patient Safety
11:20h-14:30h: Ministers' & Hea's Statements
14:15h-14:30h: Closing Plenary - Closing Remarks by the President of the Swiss Confederation, Mr. Alain Berset
14:30h-15:30h: Lunch-Break & Networking

fibrillators. The same
a certain kinds of
ity on the spinal cord.
it is in that sense
human body.





Patient Safety

5th Global Ministerial Summit 2023

8.30 AM

Day 1: Patient Safety Experts

What are your key messages for the Ministers?

6.00 PM

11.00 PM

The Catalysts

Prioritizing – Synthesizing
Delivering on Day 2

8.30 AM

Day 2: The Health Ministers

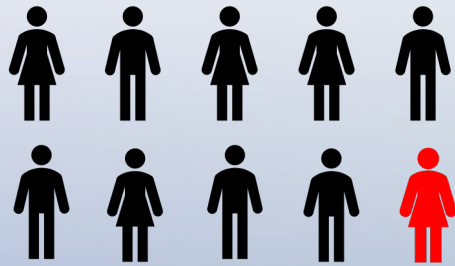
Listening and making a stand

1.30 PM



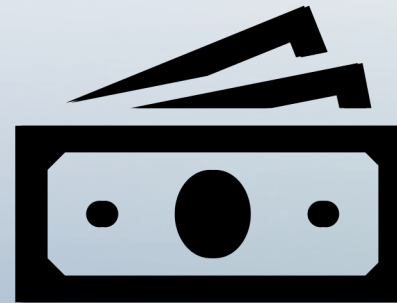


An enormous burden of harm remains, linked to unsafe care



Adverse Events in HICs

- One in every 10 patients harmed while receiving hospital care in HICs



Cost of Patient Harm

- Social cost of patient harm estimated to US\$ 1 trillion to 2 trillion a year.
- 15% of total hospital expenditure and activity direct result of adverse events



Unsafe Medication Practices and Errors

- One in 20 patients suffer avoidable medication harm
- Accounts for 50% of overall medical harm
- Could save ~42 billions USD annually

An enormous burden of harm remains, linked to unsafe care, but the patient safety movement shows unprecedented momentum



Patient Safety

5th Global Ministerial Summit 2023



72nd World Health Assembly

May 2019

- ✓ Recognized **Patient Safety** as a global health priority
- ✓ Adopted resolution (WHA72.6) on **Global action on patient safety**



GLOBAL PATIENT SAFETY ACTION PLAN 2021-2030
Towards eliminating avoidable harm in health care



Implications of the **COVID-19** pandemic for **patient safety**

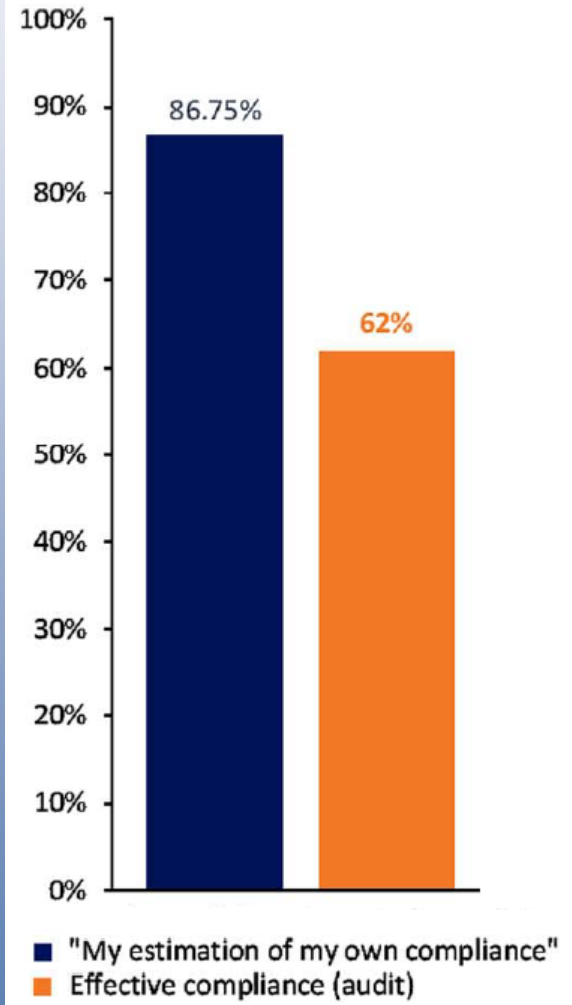
A rapid review

Adapted from slides from Dr Neelam Dhingra-Kumar, Expert Day.

Disseminating, mandating and hoping are not enough to implement evidence



Patient Safety
5th Global Ministerial Summit 2023



Staines A., ... Pittet D., Infect Control Hosp Epidemiol 2017; DOI: 10.1017/ice.2017.180



Picture:
www.flickr.com/photos/18295457@N03/5033189300

17

years

(from research into practice)

Balas EA, Boren SA. Managing clinical knowledge for health care improvement. 2000

Disseminating, mandating and hoping are not enough to implement evidence



Patient Safety

5th Global Ministerial Summit 2023

Implementation science
“the scientific study of methods to promote the systematic uptake of research findings and other evidence-based practices into routine practice”

Eccles MP, Mittman BS. Welcome to implementation science. *ImplementationSci*.2006;1:1

Process model

- 1** Step 1: *Who needs to do what, differently?*
Whose behaviour need to change, and which behaviours?
What is the evidence supporting this?
- 2** Step 2: *What factors determine whether or not they do it?*
What are the barriers and enablers?
- 3** Step 3: *Which strategies can be effectively used to target those factors?*
Which behaviour change techniques are best suited to specifically target the identified barriers and enablers
- 4** Step 4: *How can we robustly measure the outcome?*

French et al (2012) *Implementation Science* Model presented by
Jeremy Grimshaw – Expert day

The need to develop capacity and capability for patient safety improvement



Table 3. How Benchmarked Organizations Exhibited Core Capabilities

Leadership Priority Setting	<ul style="list-style-type: none"> ■ Leadership team engaged and aligned ■ Sets clear priorities based on vital few breakthrough performance areas ■ Priority areas move the organization’s business strategy by focusing on clinical, financial, employee, and patient indicators ■ Cascading system to communicate from macro- to microsystem level
Systems Approach to Improvement	<ul style="list-style-type: none"> ■ Leadership teams identify core business processes ■ Establish process map for these core areas and align improvement priorities based on vital business needs ■ National and local organization establishes oversight infrastructure to manage improvement priorities and monitor progress
Measurement Capability	<ul style="list-style-type: none"> ■ Set outcomes and improvement process metrics for key areas ■ Set performance targets to achieve best in class with national best as target ■ Use balanced scorecard system allowing front line units/departments to view performance on process as priority
Learning Organization	<ul style="list-style-type: none"> ■ Surface best practice based on evidence of performance ■ Create sharing, learning, spread systems, and capability to drive performance across organization ■ Focus on top-down and bottom-up execution
Improvement Capability	<ul style="list-style-type: none"> ■ Establish oversight system at macro and meso levels ■ Create improvement infrastructure and staff ■ Able to execute from testing through spread of practice at all levels ■ Unified internal methodology for improvement representing multiple methods ■ Internally designed and delivered improvement curriculum focused at several levels of staff and physicians ■ Improvement skills applied immediately to improvement priority
Culture	<ul style="list-style-type: none"> ■ Engage staff in improvement, make process change meaningful ■ Teach operational-level leaders (e.g., stewards, directors) deeper improvement skills using fellowship model ■ Leaders walk around and understand local-level work ■ Accountability at all levels for practice and performance ■ Data, posters, communications to help frontline staff understand the importance of their improvement work to organizational priorities ■ Microsystem approach most often stated as strategy for engagement, bottom-up approach ■ Improvement training to teach staff about system mission and priorities and create safe space to explore and learn

Capacity, capability

- Culture
- Leadership
- Vision and strategy
- Structure
- Indicators & feedback
- Education
- Communication
- Resources

The governance of the macro-system is important to support patient safety implementation and create a fertile ground



Patient Safety

5th Global Ministerial Summit 2023



OECD Health Working Papers No. 120

System governance towards improved patient safety: Key functions, approaches and pathways to implementation

Ane Auraaen,
Kristin Saar,
Niek Klazinga

<https://dx.doi.org/10.1787/2abd9834-en>

OECD Health Working Papers No. 150

Advancing patient safety governance in the COVID-19 response

Katherine de Bienassis,
Zuzanna Mieloch,
Luke Slawomirski,
Niek Klazinga

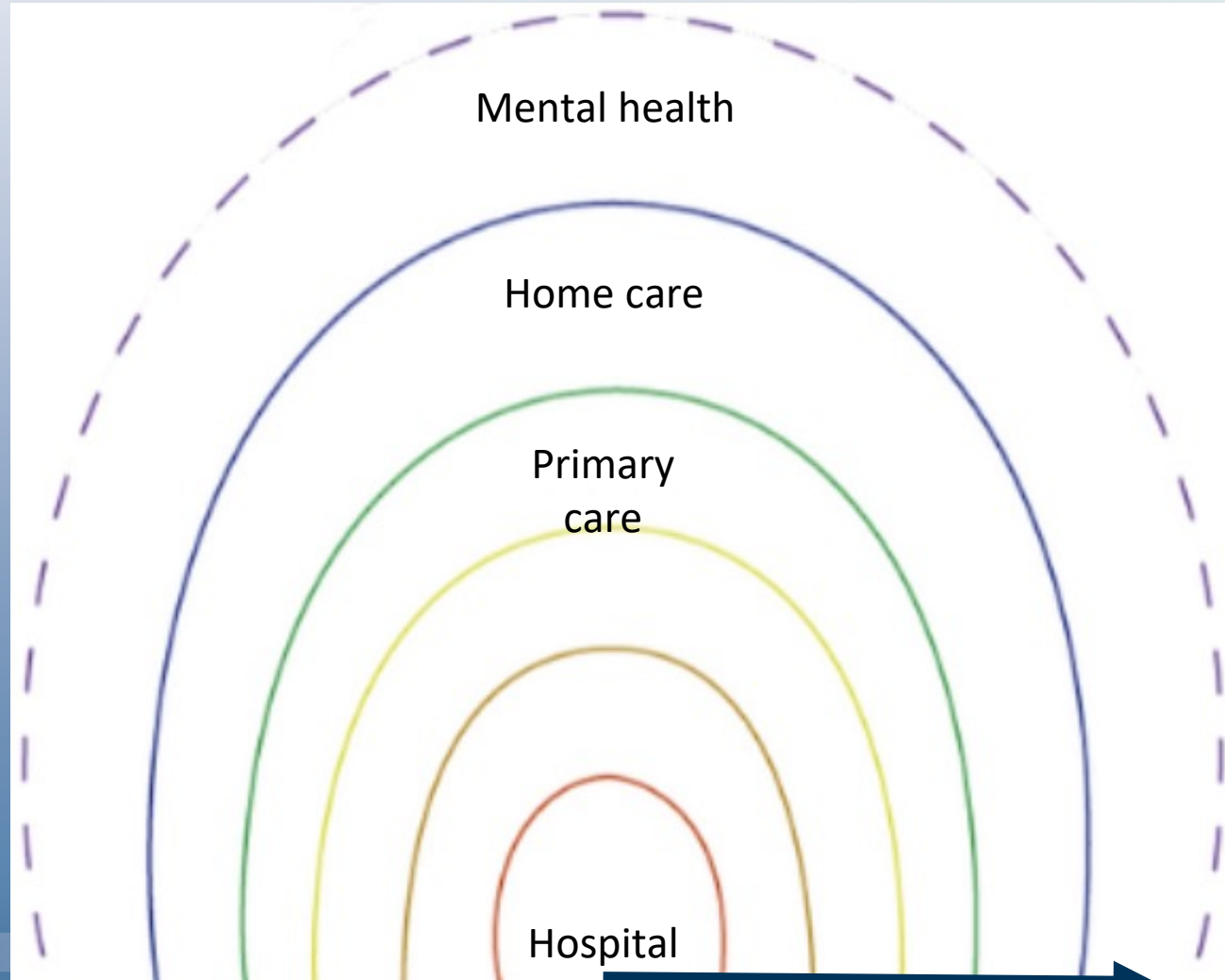
<https://dx.doi.org/10.1787/9b49484-en>



Patient Safety

5th Global Ministerial Summit 2023

The scope of patient safety governance should include all healthcare sectors and settings, including primary care, mental health, ...





Patient Safety

5th Global Ministerial Summit 2023

“Nothing
about me
without me”

Patient safety





Healthcare-associated
infections

Antimicrobial resistance

Unsafe patient care


Silent

Solutions and interventions that improve
patient safety would result in a better
handling of crises such as **Covid-19**
pandemics



The way forward

- Widening our definition of harm
- Leading culture change for Patient Safety
- Heavily investing in staff safety, well-being and psychological safety.
- Taking a leap in partnering with Patients and Carers.
- Developing interprofessional teamwork for Patient Safety
- Managing risks on a patient pathway, not just in a single ward or institution
- Building capacity and capability for Patient Safety.
- Embedding Patient Safety in the governance process at the macro, meso, micro-system.



Together, we can create a safer healthcare
system with zero preventable harm.

Thank You