دانشگاه علوم پزشکی و خدمات بهداشتی درمانی تبریز

2nd Tabriz Virtual Patient Safety and Medical Education International Congress

(9 AM – 12 PM) 21 – 25 oct , 2023

Tvpm zoom

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دومین کنگره بین المللی مجازی
ایمنی بیمار و آموزش پزشکی

۲۹ مهر لغایت ۳ آبان ۱۴۰۲

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Patient Safety Standards in Patient Safety Friendly Hospitals

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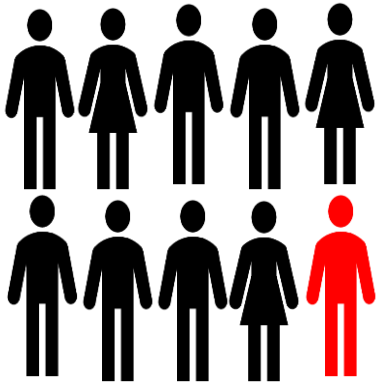
Global burden of unsafe care!

- Two-thirds of patient harm occurs in LMIC
- Safety failures: 14th leading cause of death and injury globally.
- One in ten hospitalizations worldwide results, on average, in a safety failure or other adverse event
- As many as 42 million patients go to the hospital hoping to get better, but in fact are harmed
- Approximately 15% of all hospital activity and expenditure is a direct result of adverse events



Global burden of unsafe care!

- In low- and middle-income countries, unsafe healthcare services still lead to 134 million adverse events annually.
- These adverse events account for nearly 2.6 million deaths each year (LMICs).
- In the Eastern Mediterranean Region, evidence shows that up to 18% of hospital admissions are associated with adverse events, 80% of which are considered preventable.

Prevalence and Preventability of Adverse Events in 6 EMR countries (2012)

Country	No. of records	Adverse event rate	Permanent disability	Percent deaths	Percent AE preventable
Egypt	1358	6 [4.7-7.2]	0.7%	1.3%	73%
Jordan	3769	2.8 [2.3-3.3]	0.1%	0.6%	83%
Morocco	984	14.8 [13.6-16.]	3.4%	3.6%	86%
Sudan	3977	5.5 [5.1-5.9]	0.6%	1.6%	84%
Tunisia	930	8.3 [6.9-8.7]	0.7%	1.3%	86%
Yemen	1661	18.4 [17.4-19.3]	3.1%	4.3%	93%
EMR [Range]	12679	2.8-18.4	0.1-3.1%	0.6-4.3%	73-93%

Wilson et al (2012). Patient safety in developing countries: retrospective estimation of scale and nature of harm to patients in hospital. BMJ; 344: 1-14.

8.2%

1.8%

83%

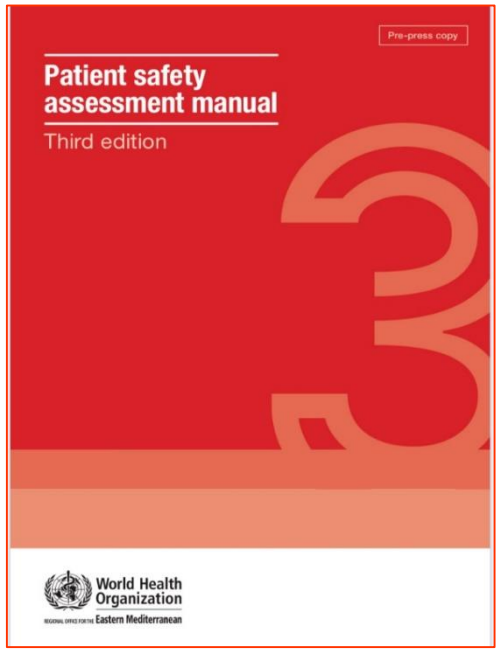
Prevalence and Preventability of Adverse Events
A prospective study in one EMR country (2017)

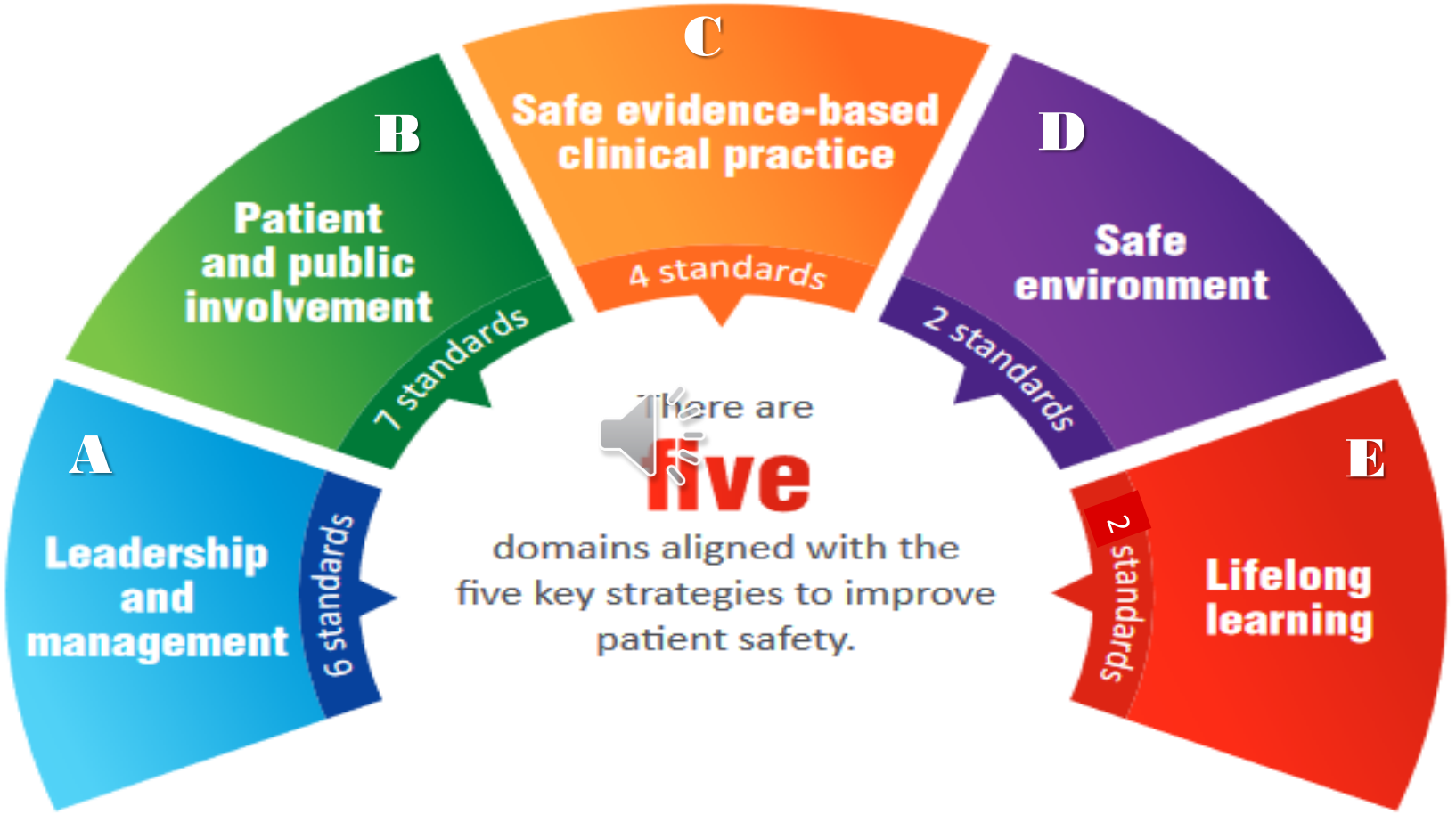
Unsafe care	%
The overall rate of Adverse Events	18.1
Preventability	62
Operative Adverse Events	34.9
Hospital Acquired Infections	30.3
Medication Errors	18.2

Source: Journal of Patient Safety 2017

Five key strategies to improve patient safety

PSFHF domains, standards and criteria





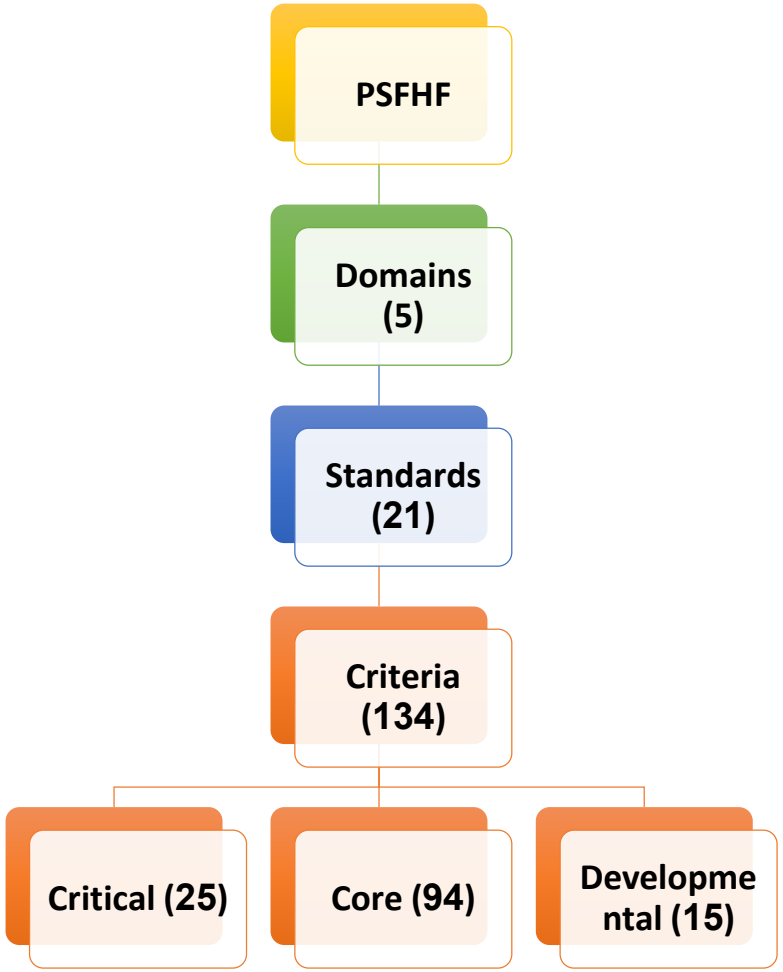
Each of the five patient safety domains comprise a number of standards and each standard is assessed against a number of identified criteria. There are **134 criteria** that cover the five domains, including **25 critical criteria**, **94 core criteria** and **15 developmental criteria**.

Patient safety assessment manual

Third edition

Structure of the PSFH

the domains, standards and criteria



PSFHF Domains, Standards and Criteria

Domains (standards)	Critical criteria	Core criteria	Developmental criteria	Total criteria in each domain
A. Leadership and management (6)	7	26	3	36
B. Patient and public involvement (7)	2	22	7	31
C. Safe evidence-based clinical practice (4)	14	24	2	40
D. Safe environment (2)	1	20	1	22
E. Lifelong learning (2)	1	2	2	5
Total (21)	25	94	15	134

PSFH DOMAINS

A: Leadership and Management	The leadership and governance are committed to patient safety
B: Patient and family involvement	There is a program to protect the rights of patients which includes patient safety
C: Safe evidence based clinical practice	The hospital has an effective clinical governance that ensures the inclusion of patient safety
D: Safe physical environment	The hospital has a safe and secure physical environment for patients and staff
E: Lifelong Learning	The hospital has a staff professional development program with patient safety as a cross-cutting theme

Domain A : Leadership and Management

Domain A	Standard Statement	Number of Criteria		
		Critical	Core	Developmental
Leadership and Management	A.1 The leadership and governance are committed to patient safety.	3	4	1
	A.2 The hospital has a patient safety program.	1	7	1
	A.3 The hospital uses data to improve safety performance.	0	2	1
	A.4 The hospital has essential functioning equipment and supplies to deliver its services.	1	3	0
	A.5 The leadership ensures the provision of competent staff, including independent practitioners and volunteers, to deliver safe care at all times.	2	6	0
	A.6 The hospital has an information management system to support safe practices for all departments	0	4	0
	Total	7	26	3
	Number of Criteria	36		

Domain B: Patient and Public Involvement

Domain B	Standards	Number of Criteria		
		Critical	Core	Developmental
Patient and Public Involvement	B1. There is a program to protect the rights of patients that includes PS.	0	4	0
	B2. The hospital builds health awareness for its patients and carers to empower them to share in making the right decisions regarding their care.	1	7	2
	B3. The hospital ensures proper patient identification and verification at all stages of care.	1	2	1
	B4. The hospital involves the community in different patient safety activities.	0	2	2
	B.5 The hospital communicates PS incidents to patients and their carers.	0	2	0
	B.6 The hospital encourages feedback from patients and acts upon the patients' concerns and compliments.	0	2	2
	B.7 The hospital has a patient safety friendly environment.	0	3	0
		2	22	7
	Total Number of Criteria	31		

Domain C: Safe Evidence-based Clinical Practice

Domain C	Standards	Number of Criteria		
		Critical	Core	Developmental
Safe Evidence-based Clinical Practice	C1. The hospital has effective clinical governance that ensures inclusion of patient safety.	6	8	0
	C2. The hospital has a system to reduce risk of hospital-acquired infections (HAIs).	3	8	1
	C3. The hospital ensures safety of blood and blood products.	2	2	0
	C4. The hospital has a safe medication system.	3	6	1
		14	24	2
	Total number of Criteria	40		

Domain D: Safe Environment

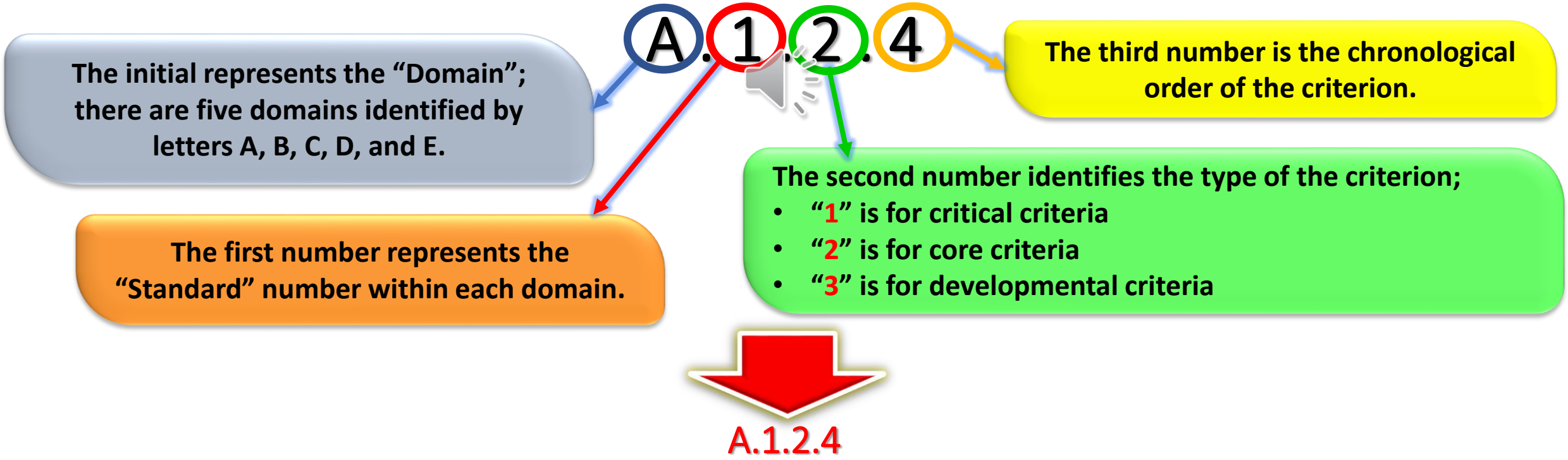
Domain D	Standards	Number of Criteria		
		Critical	Core	Developmental
Safe Environment	D1. The hospital has a safe and secure physical environment for patients, staff, volunteers and visitors.	0	15	1
	D2. The hospital has a safe waste management system.	1	5	0
	Total	1	20	1
	Total number of Criteria	22		

Domain E: Lifelong Learning

Domain E	Standards	Number of Criteria		
		Critical	Core	Developmental
Lifelong Learning	E1. The hospital has a staff professional development programme with patient safety as a cross-cutting theme	1	1	0
	E2. The hospital conducts research and quality improvement projects in patient safety on an on-going basis	0	1	2
		1	2	2
	Total number of Criteria	**5**		

Structure and components of PSFHF

"Criterion" is the building block of the PSFH Framework. Each criterion is identified by a code that consists of an initial letter followed by three numbers, e.g. **A.1.2.4**.



It is the criterion number "4", which is a "Core" criterion, in the standard "1" of Domain "A".

Evaluation Process

- Review the documents
- Confirm the reviewed documents and data through interview and observation
- Read through the scoring guidelines
- Provide constructive feedback and recommendations on how to improve patient safety.

The survey team want to praise and pass

Triangulating evidence

Scoring Scale

Rating	Score	Rational	Surveyor
Met ✔	1	**80% or above compliance** Standard met for structure, process and output.	Add a recommendation or an opportunity for improvement (OFI)
Partially Met ◑	0.5	**From 31-79% compliance** Standard met for structure and process.	Add a recommendation or an OFI to assist the primary care facility to improve
Not Met ○	0	**Less than 30% compliance** Standard not met	Add recommendations and time scale
Not Applicable ⊘	NA	If the service mentioned in the criterion is not supported by the assessed hospital	

Three Stages

- 1. Have all critical criteria met the level of compliance with a score of 80% or above (Met)? If yes, then
- 2. What is the percentage of compliance to the core criteria?
- 3. What is the percentage of compliance to the developmental criteria?

Level of Achievement

- As an assessor, you have first to check the compliance with the critical criteria, if 100% met then you follow by assessing the core and developmental criteria to classify the hospital at one of four levels.

Hospital level	Critical	Core	Developmental
Level 1	100%	Any	Any
Level 2	100%	60–89%	Any
Level 3	100%	≥90%	Any
Level 4	100%	≥90%	≥80%

- Level Four is the optimal level of SAFETY.

How to start ?

1 Self-assessment

- It is recommended that a small team shall work on a self-assessment process and then share with all staff. Focus; identifying areas for improvement.

2 External assessment

- An external group of surveyors visit the hospital to perform the PSFH assessment to determine the level of compliance.

3 Giving a score and embarking improvement

- The external surveyors give an overall level of compliance to the hospital. More importantly, a report and recommendations guide the hospital to continuously improve.

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Patient Safety is a Collective Responsibility

Thank you

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