دومین کنگره بین المللی مجازی ایمنی بیمار و آموزش پزشکی

۲۹ مهر لغایت ۳ آبان ۱۴۰۲

2nd Tabriz Virtual Patient Safety and Medical Education International Congress

(9 AM – 12 PM)
21 – 25 oct , 2023

Tvpm   zoom

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History of the PSFFs

PSFHI
(2011)

PSFHF
(2021)

PSFPCF
(2022)

Background, PHC and Patient Safety !

● **Patient Safety: An important priority for health systems regardless of income status.**

● **Critical to achieving Universal Health Coverage(UHC): UHC without safer care is an empty vessel.**

● **Aims at avoiding harm to people for whom the care is intended.**

● **Underpins the principle of "first do no harm".**

● **One of the most important components of healthcare delivery/ Safety is the entry point to ensuring quality healthcare.**

Background, The burden of unsafe care !

- Globally, unsafe care results in **over 3 million deaths** each year.

- Recent estimates suggest that as many as **4 in 100 people** die from unsafe care in low- to middle-income countries (LMICs).

- The health burden of harm is estimated **at 64 million Disability-Adjusted Life Years (DALYs) a year**, similar to that of HIV/AIDS.

- **High preventability**, investment in Patient Safety offers good returns.

4 in 10 patients

are harmed in primary and outpatient health care

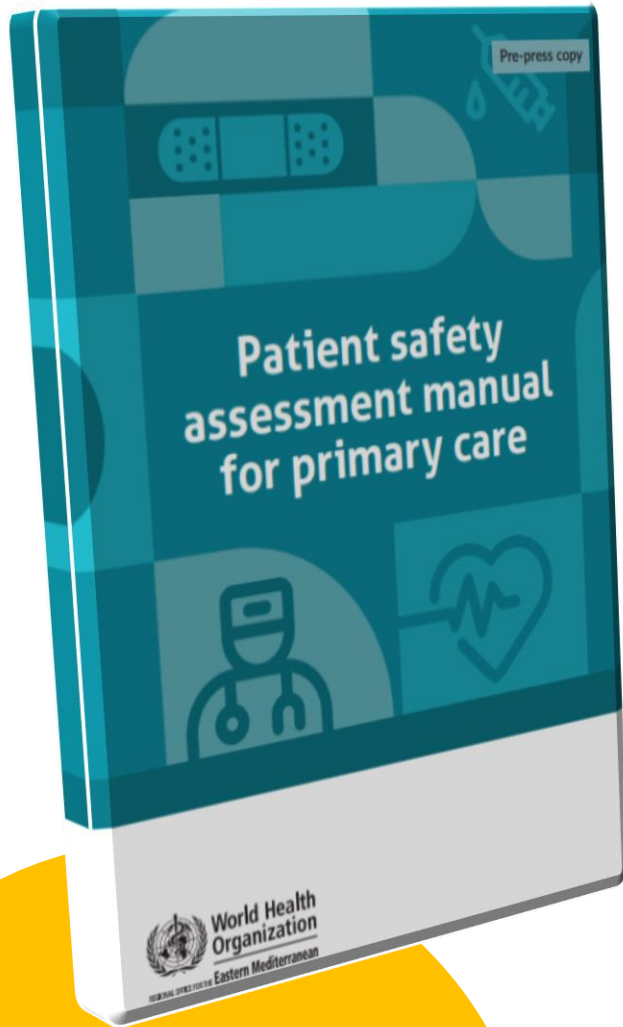## Speak up
for patient safety!

World Health Organization
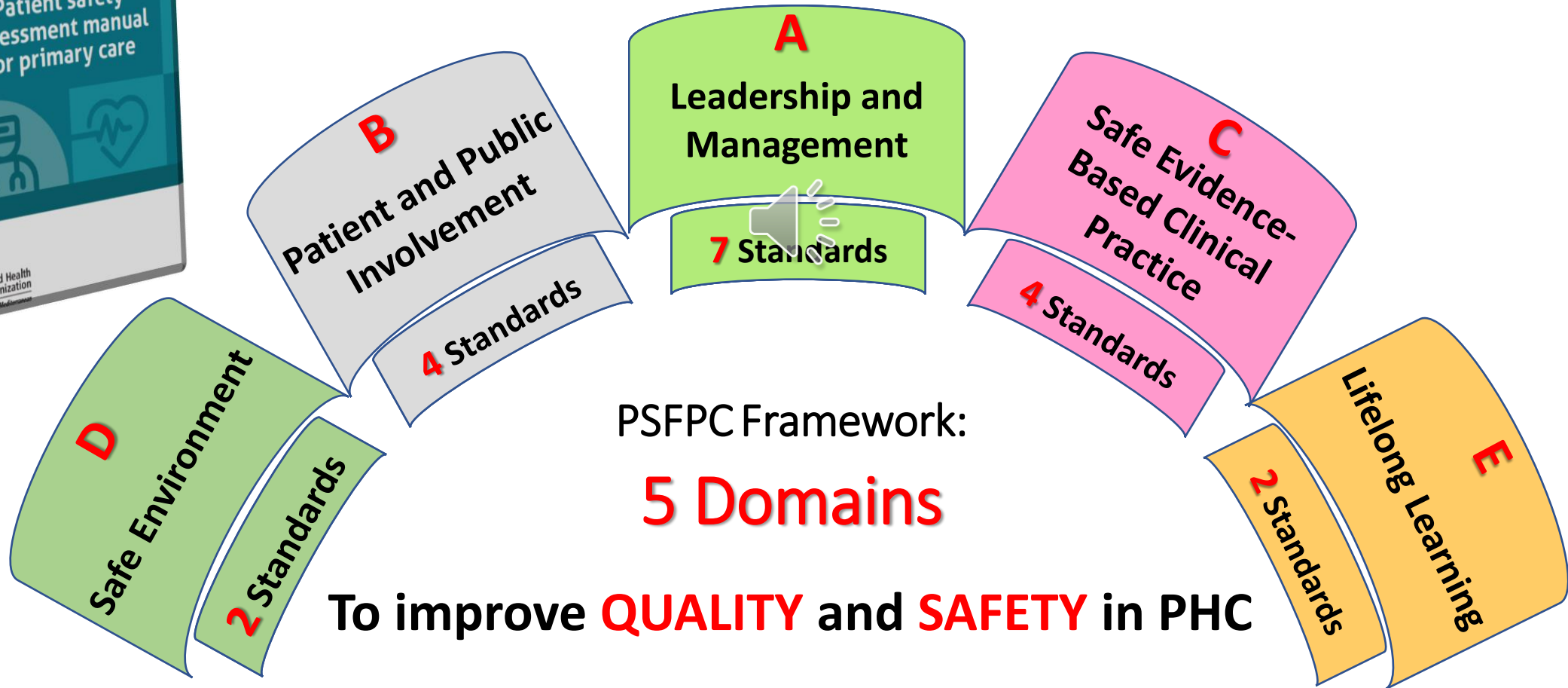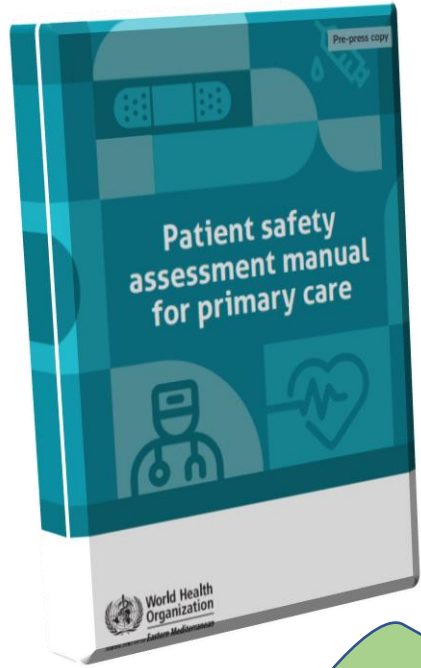
World Patient Safety Day 17 September 2019

WHO estimates that scaling up PHC across low and middle-income countries could **save 60 million lives** and **increase average life expectancy by 3.7 years** by 2030.

Patient Safety Assessment Manual for Primary Care

- Goal is to improve the level of patient safety in primary care facilities by creating conditions that lead to safer care, thus reducing adverse events in primary care settings

- Includes a set of requirements critical for the establishment of a patient safety program at the primary care level.

- Enables primary care facilities to assess patient care from a patient safety perspective, build the capacity of staff in patient safety, and involve patients and carers in improving primary care services

- Is applicable to the whole facility, not just a part of it or a specific service it provides.

- Assessment is voluntary and is conducted through an external peer-review survey

- Concentrates on patient safety and emphasizes continual improvement rather than an award

Patient Safety Friendly Primary Care (PSFPC) Framework

Patient safety assessment manual for primary care

World Health Organization

A
Leadership and Management
7 Standards

B
Patient and Public Involvement
4 Standards

C
Safe Evidence-Based Clinical Practice
4 Standards

D
Safe Environment
2 Standards

E
Lifelong Learning
2 Standards

PSFPC Framework:

5 Domains

To improve **QUALITY** and **SAFETY** in PHC

Primary Care Facility and Patient Safety

Building/
Physical Environment

Healthcare
professionals/Team

Patients/
Community

Management
Board

D. Safe Environment

C. Safe Evidence-Based
Clinical Practice

E. Lifelong learning

B. Patient & Public
Involvement

A. Leadership &
Management

The domains
of PSFPC
Framework
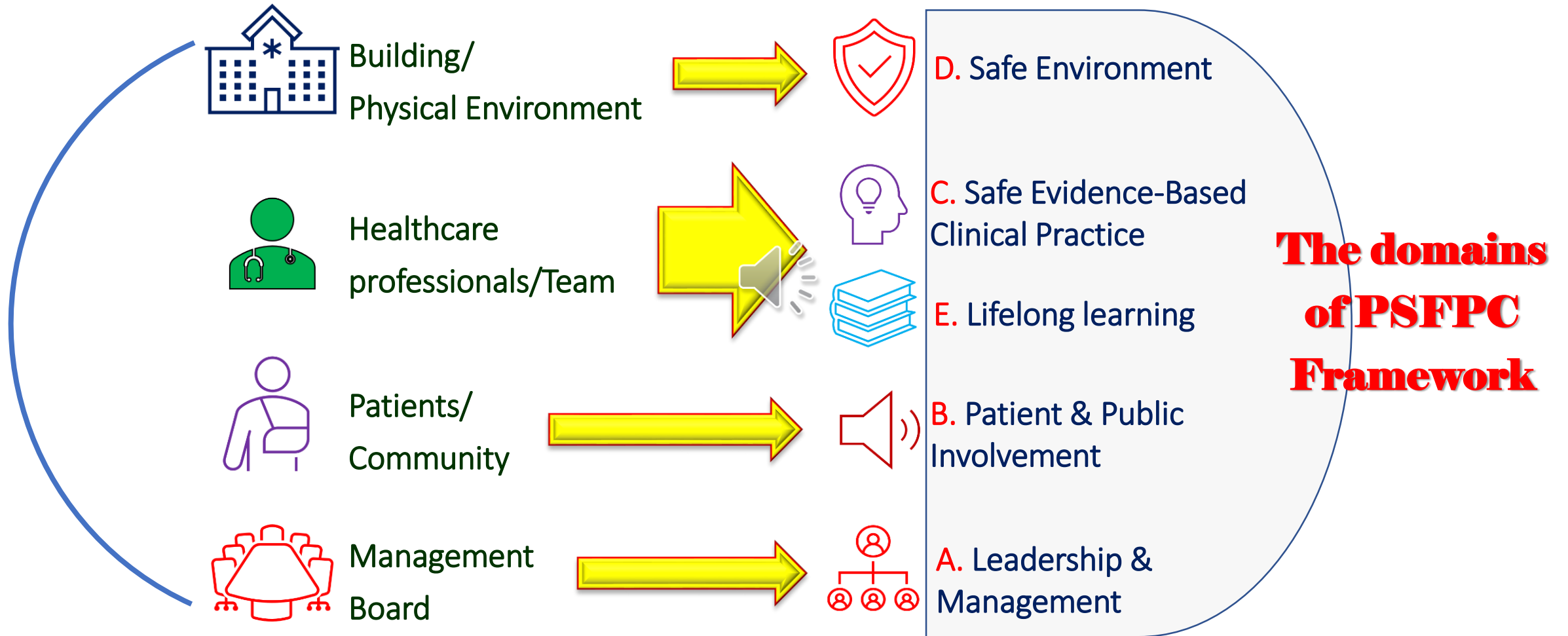
Patient Safety Friendly Primary Care (PSFPC) Framework; Domains and Aims

PSFPC Framework encompasses different standards under these FIVE domains
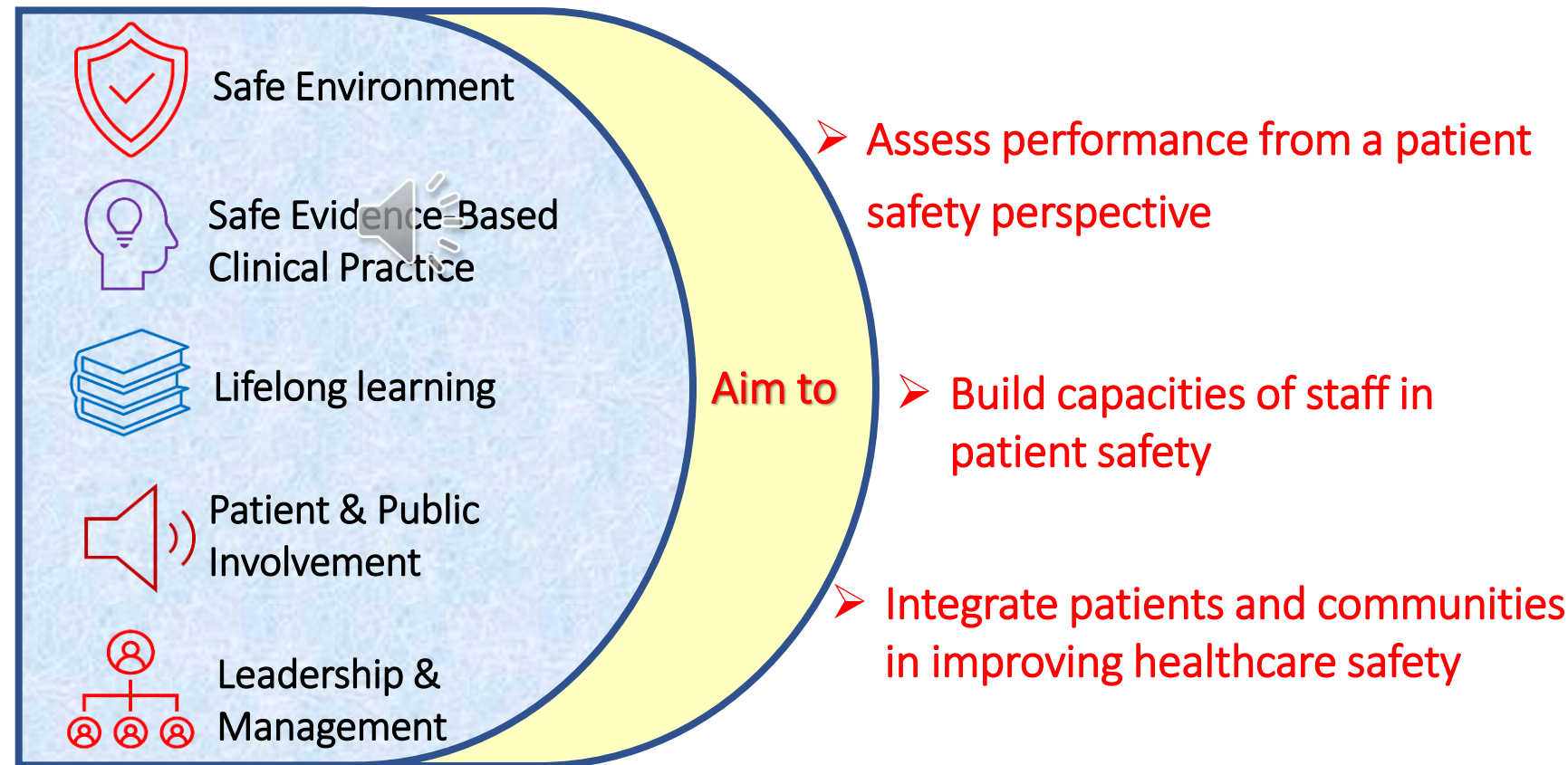
- Safe Environment
- Safe Evidence-Based Clinical Practice
- Lifelong learning
- Patient & Public Involvement
- Leadership & Management

Aim to

➤ Assess performance from a patient safety perspective

➤ Build capacities of staff in patient safety

➤ Integrate patients and communities in improving healthcare safety

Patient Safety Friendly Primary Care Framework

Domains (standards)	Critical criteria	Core criteria	Developmental criteria	Total criteria in each domain
A. Leadership and management (7)	8	23	6	37
B. Patient and public involvement (4)	3	14	3	20
C. Safe evidence-based clinical practice (4)	13	25	6	44
D. Safe environnent (2)	5	13	1	19
E. Lifelong learning (2)	1	3	1	5
Total	30	78	17	125

Domains: 5; Total Standards: 19; Total Criteria: 125

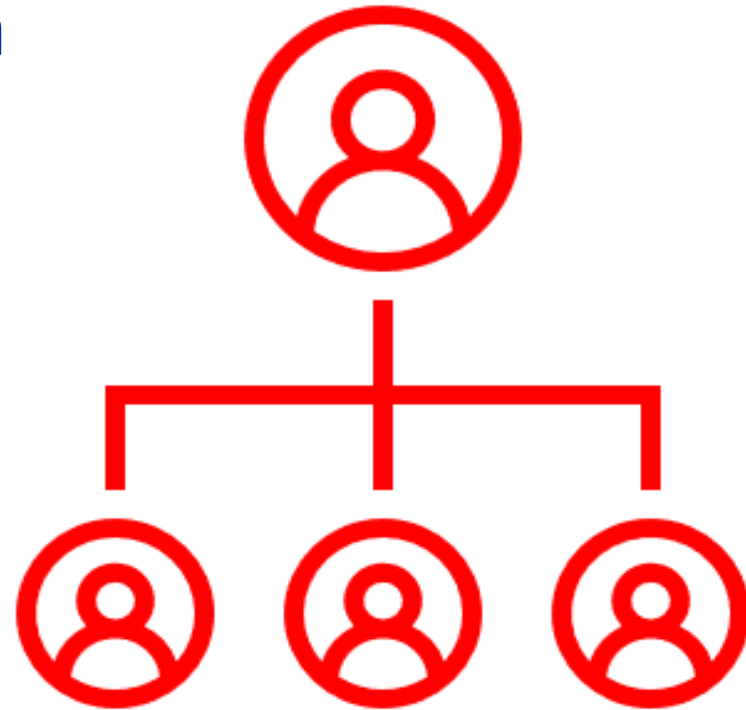critical criteria : 30; core criteria : 78; developmental criteria : 17

Structure of the PSFPC, the domains, standards and criteria
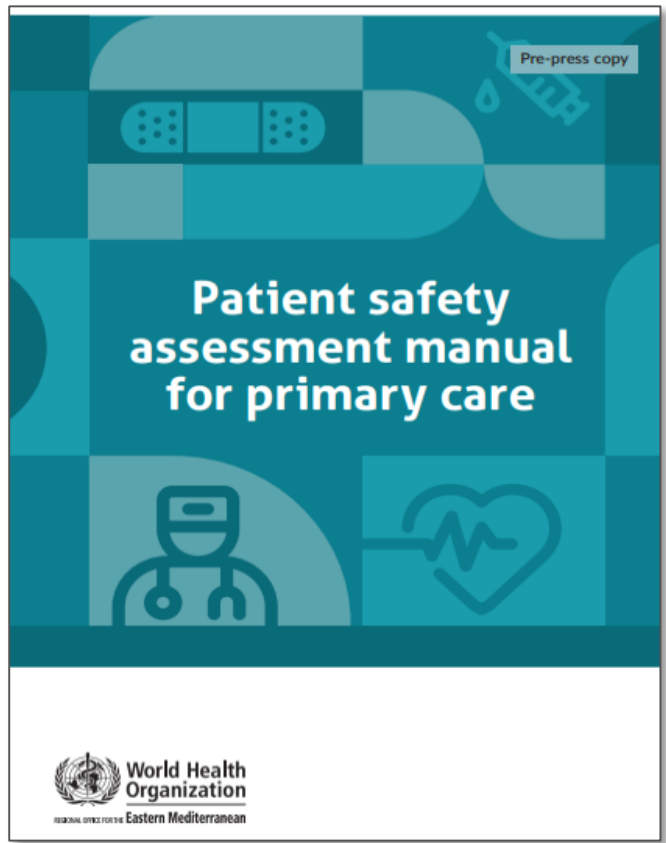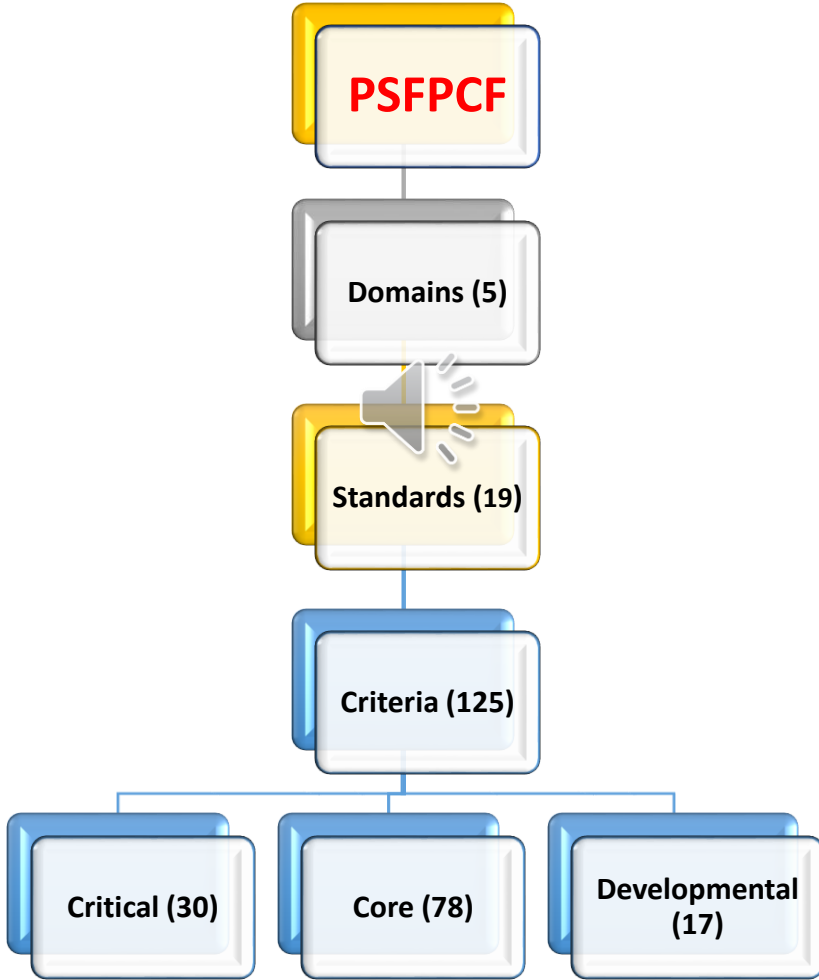
Domain A: Leadership and Management

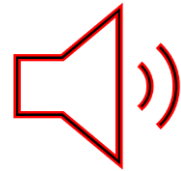**7 standards organised in 37 criteria**

- **8 critical**

- **23 core**

- **6 developmental.**

Domain A: Leadership and Management

Domain A	Standards	Number of Criteria		
		Critical	Core	Developmental
Leadership and Management	**A1**. Leadership and **management are committed** to patient safety	4	4	2
	A2. The primary care facility has a **patient safety** program	1	4	2
	A3. The primary care facility **uses data to improve safety** performance	0	2	1
	A4. The primary care facility 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	1	0
	A.6 The primary care facility has **an information management system** to support safe practices	0	4	1
	A.7 The primary care facility supports a **work health and safety** program	0	5	0
		8	23	6
	Total Number of Criteria	37		

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** which includes patient safety.	0	5	0
	B2. The primary care builds health **awareness** for its patients and carers **to empower** them to share in **making the right decisions** regarding their care.	1	6	1
	B3. The primary care ensures **proper patient identification and verification** at all stages of care.	2	1	1
	B4. The primary care **encourages feedback from patients** and acts upon the patients' concerns and compliments.	0	2	1
		3	14	3
	Total number of Criteria	20		

Domain C: Safe Evidence-based Clinical Practice

Domain C	Standards	Number of Criteria		
		Critical	Core	Developmental
Safe Evidence-based Clinical Practice	**C1.** The primary care has effective clinical governance that ensures the inclusion of patient safety.	3	4	1
	C2. The primary care has a system to reduce the risk of healthcare-associated infections.	2	6	1
	C3. The primary care has a safe medication system.	4	5	1
	C4. In the event of an infectious disease outbreak the primary care has systems in place to manage and control the emergency.	4	10	3
		13	25	6
	Total number of Criteria	44		

Domain D: Safe Environment

W-A-S-H

Domain D	Standards	Number of Criteria		
		Critical	Core	Developmental
Safe Environment	**D1.** The primary care facility has a safe and secure physical environment for patients and staff.	1	9	0
	D2. The primary care facility has access to WASH and waste management services.	4	4	1
		5	13	1
	Total number of Criteria	19		

Domain E: Lifelong Learning
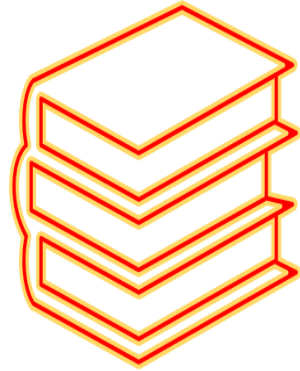
Domain E	Standards 🔊	Number of Criteria		
		Critical	Core	Developmental
Lifelong Learning	**E1.** The primary care facility has a **staff professional development program** with patient safety as a cross-cutting theme	1	1	0
	E2. The primary care facility **conducts research and quality improvement projects** in patient safety	0	2	1
		1	**3**	**1**
	Total number of Criteria	**5**		

Outline of the numbering system

Example: A.1.1.2 The leadership has a long-term strategic plan that includes patient safety as a priority.

A.1.1.2

A=Domain   1=Standard   1=Critical Criterion   2=Criterion

B.2.2.1

Domain **B**

Standard **B.2**

Type of Criterion: 2 = **Core**
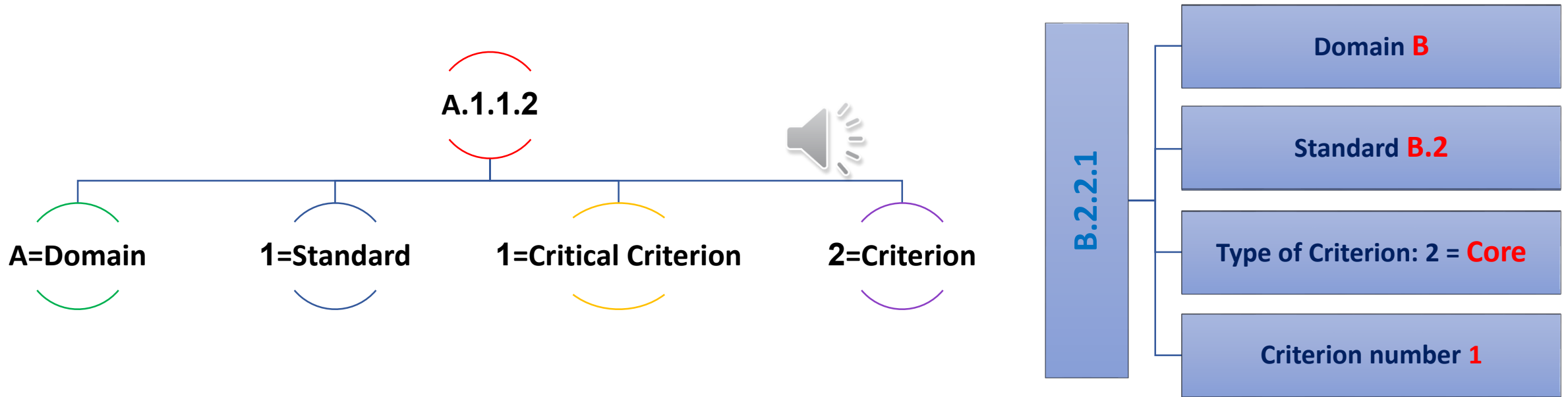
Criterion number **1**

It is the criterion number "2", which is a "Critical" criterion, in the standard "1" of Domain "A".

Example of the numbering system

Evidence assessment (Peer Review)

The assessment runs through 3 independent but interconnected levels: Triangulation.

Document review

Review all Protocols, Guidelines, Standards, Policies, ... relevant to the assessed domains and criteria

Interview

Interview with primary care leadership, health care professionals and customers

Observation

Observation of physical environment, service units, ...

Observation | Document review | Interview

Environmental Facilities

Radiology

Medical Records

Pharmacy

Clinical Areas

Each practice will have its general environment, clinical areas, and medical records that will be all under assessment

Grading Scale

● It is a three-levels grading scale with a top score of "1" for each criterion.

○ Score "1" if >80% compliance

○ **Score "0.5" if 31%-79% compliance   ; (**except for critical criteria**)**

○ **Score "0" if <30% compliance**

○ Score "N/A" as "Not Applicable" if the service mentioned in the criterion is not supported by the assessed facility

Rating	Score	Rationale	Surveyor action
Met	1	80% or above compliance	Add a recommendation or an opportunity for improvement
Partially met	0.5	31–79% compliance	Add an opportunity for improvement or a recommendation to assist the facility in improving
Not met	0	Less than 30% compliance	Add recommendation and time scale

Level of assessment

● 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 facility at one of four levels.

Primary care 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.

Patient Safety is everybody's business

Thank you

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