



Patients for Patient Safety News July 2010

Welcome to the latest edition of the PFPS Newsletter, featuring news from the PFPS network in Canada, an article on patient safety challenges in India and many other Champion activities around the world.

Patients for Patient Safety Canada

Ryan Sidorchuk, PFPS Champion, Canada

On 5 May, nearly four years after we held the first 'in-country' meeting of Patients for Patient Safety, the group launched as a stand-alone organization, with the aim of increasing our membership roster and organizational partnerships throughout Canada.

Our mission is to "champion the patient voice to advance safe health care", and our vision is "every patient safe". We are a volunteer group made up of patients and families, and some of us work in the health care system, both before our experienced adverse event, and after. Many of us seek opportunities to share our tragic stories towards capturing the hearts of people to harness the passion necessary for the challenge of complex system change. Many of us seek to offer our expertise as "Quality Control Officers" by virtue of our experience in the health care system as patients and family members to professional teams and groups, who are working on the improvement of quality and safety in health care.

Many people and organizations have contributed to moving us forward over the years. For example, the Canadian Patient Safety Institute (CPSI) has been an ardent supporter, financially and otherwise, since our first meeting in Vancouver in October 2006.

Our approach to improving patient safety and quality of care in Canada is one of appreciative insistence. Rarely do improvement efforts include the people's perspective of whom they are meant to serve-the patients and families of Canada.

Four primary goals

- To realize full disclosure about all adverse events
- To incorporate the patient experience in patient safety research
- To involve patients and families in all care decisions
- To be continual learners and educators about patient safety

We do not pretend to speak for all patients in Canada, and seek only to offer an organizationally-unified voice towards the promotion of safer health care for all.

We recognize that many paths can lead to the same destination. The particular path Patients for Patient Safety Canada offers both partners and members is, again, one of appreciative insistence for the improvement of safety and quality throughout the pan-Canadian health care system.

For more information visit the website: www.patientsforpatientsafety.ca

Patients for Patient Safety Canada Launches Nationally

The launch of PFPS Canada was held at the North York General Hospital, Toronto, in conjunction with Stop! Clean Your Hands day.

"Patients and families see aspects of health care that providers themselves are often too overloaded to notice, and these details can often mean the difference between positive and negative outcomes", says Donna Davis, Co-Chair of Patients for Patient Safety Canada. "For example, less than 40 per cent of health care providers wash their hands appropriately before caring for patients."

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More News from PAHO

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That is why Patients for Patient Safety Canada has decided to launch on national Stop! Clean Your Hands Day. "After watching my mother-in-law's death from a *C. difficile* infection, I have a strong message for care givers, patients, and loved ones:- WASH YOUR HANDS," says Johanna Trimble of Patients for Patient Safety Canada.

"At CPSI our priority is to build the safest health care system in the world. We can do this by working with organizations like Patients for Patient Safety Canada to help us ensure the patient voice is heard," says Hugh MacLeod, CEO, CPSI. Patient for Patient Safety Canada have played a key role improving patient safety in Canada and most importantly to give patients permission and authority to initiate change."

Patients for Patient Safety Canada welcomes patients and families from across Canada to join the cause of safe health care for all. As well, we invite healthcare organizations to partner with us towards a truly patient and family centred approach. Together, we will work towards the reduction of unintended harm as a result of health care.

Visit us at www.patientsforpatientsafety.ca



Mackenzie Sheridan awarded 'Outstanding Youth'

Susan Sheridan's daughter Mackenzie was recently recognized by the Mayor of Boise, Idaho as one of the "Outstanding Youth of Idaho."

Those nominated were honored for their accomplishments in overcoming struggles, serving as peer role models, or helping to better their schools and communities. Mackenzie's nomination letter from her teacher and school Director stated:

"This student has an amazing and powerful story. Mackenzie's father passed away from cancer, and her teenage brother Cal has Cerebral Palsy. Watching her family members struggle with health issues has inspired Mackenzie to spearhead a campaign to create an organization she has named "Cancer Kids". Mackenzie believes it is important for young people to visit, support, and boost the morale of children with cancer.

Mackenzie is a compassionate person who really wants to make an impact on her world. Her vision is to begin "Cancer Kids" in Boise and expand it to the national level... Mackenzie is an excellent student who has earned the respect of her peers and teachers at Foothills.

Mackenzie is truly an exceptional young person who is willing to sacrifice her time and energy to improve the lives of others."

For more information email Susan at psheri9110@aol.com

Patient Safety in Neonatal Care

Jorge Martinez, PFPS Champion, Argentina

The International Symposium of Neonatology took place in Brazil on April 7-10. I was invited to speak on "How to prevent errors in the Neonatal Intensive Care Unit", "Care of the family in the Neonatal Unit" and "The intelligence of the newborn. Stress and Programming."

There was an excellent reception from the audience, especially on the safety topics. A WHO PSP film was shown and the audience were touched by the emotional experiences shared in the interviews. The experience in Brazil proves once more that in a Scientific Meeting even when Safety is not the main goal of the meeting, once the topic is presented the interest of the audience clearly shows that patient safety has become a priority for health-care providers.

On April 19-20, the National Congress on Health Care Quality took place in Argentina. I was invited to speak about "Safety, quality and the doctor-patient relationship". I introduced the WHO Curriculum Guide on Patient Safety for Medical Schools, discussing experiences in the pilot study in Argentina so far. I also presented on the Academic Extension Preventive Medicine Programme for parents and professionals "An Invitation to Life" related to infant safety health, growth and development that Del Salvador University has been running for 12 years. Once again there was an excellent reception from the audience and they showed eagerness to know more.

For more information email Jorge at jormar@intramed.net

Italian Patient Safety Conference

Jolanta Bilinska, PFPS Champion, Poland and Silvana Simi, PFPS Champion, Italy

On 28 May 2010, a conference was held in Florence, "Together to improve the quality of care and patient safety". It brought together clinicians, health-care administrators, patients, representatives of patients' organizations, citizens committed to patient safety, the Assessore Regionale (Tuscany) for health care and two politicians from the Italian Parliament. Speakers stated that patient safety is now the crucial issue for medicine, as also indicated from results of the Eurobarometer Survey.

Participants agreed that communication between patients and medical staff forms the basis for common successful cooperation. Some patients said that to improve the quality of health means to empower patients and families, and others highlighted the importance of making information public i.e. the number of surgical interventions made in a hospital/ by a surgeon and the success rate. Patients also stressed the need for more time during medical visits, with more opportunity to ask doctors all the questions they think important, and importantly for doctors to have time to answer properly.

We were invited to Florence to speak about PFPS. It was great to have a chance to speak about what Champions are doing globally, and how PFPS has been probably one of the most important and innovative initiatives in health care, for its potential to really make medicine safer and more accountable through true patient involvement and participation.

For more information please email s.simi@ifc.cnr.it or j.bilinska@nfz-lodz.pl



EURO News

Citizen Training Network in Patient Safety, Spain

Adoracion Carpintero, PFPS Champion, Spain

Last October I took part in the last Workshop of the Citizen Training Network in Patient Safety, created by the Quality Agency of the Spanish National Health System, with the support of the Andalusian School of Public Health. Participants included patients and citizens from different regions of Spain.

During 2009 we participated in different Patient Safety workshops on;

- Safe Care
- Safe Medication
- Infection Prevention



The experience has been very gratifying, not only because we have been able to learn about Patient Safety, but also because it has afforded us the opportunity to share experiences and to discuss and reflect on all matters relating to Patient Safety. We are lucky to have this project, because it includes patients' role as a very important component of Patient Safety.

We intend to organise workshops on Patient Safety with other patients and citizens that Patient's Associations and Regional Authorities can apply for.

For more information:
<http://formacion.seguridaddelpaciente.es/> or email aedaal_dora@yahoo.es

Patient Safety in India

An article by Nanthini Subbiah, Deputy Secretary General, Trained Nurses Association of India

"The very first requirement in a hospital is that it should do the sick no harm" Florence Nightingale said about 150 years ago. Advancement in medical technology has made a significant impact in the treatment of patients across the world. However the complexity of treatment has at the same time exposed patients to greater risk.

Evidence shows that over 1.4 million people worldwide are suffering from health care-associated infection (HAI). Studies from the UK, USA, Australia and many other developed countries suggest that 1 in 10 patients suffer adverse events during their stay in hospital due to medical mistakes.

Since there is no national reporting and learning system in India, no reliable data is available with regards to patient safety incidence, but experiences in health-care settings, media reports and estimates by global agencies show that the situation in India is not good.

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The risk of acquiring HAI is significantly high in the country. Neonatal infections are 3 to 20 times higher comparing with developed countries. Unsafe injection practices, poor collection and disposal of hospital waste, poor quality of medical equipment and usage of sub-standard drugs pose severe threat to patient safety.

A rising level of income, growing elderly population, changing demographic profile, the shift from chronic to lifestyle diseases, changing environmental conditions and emerging and re-emerging infectious diseases lead to demand for quality health care. But providing patient safety to India's billion plus population, the majority of whom are living below the poverty line in rural communities is a challenge. The health care providers are faced with the need to spend the limited resources more effectively.

The country has many national programmes to control and eradicate various diseases but nothing on patient safety. There is no mandated patient safety standard and no mandatory practice of clinical audit. Internal clinical audits are only practiced in some large hospitals, and standards are voluntary in nature. There is no regulatory body to monitor the functioning of the private sector, and no reporting and learning system. The public health spend is small, with the current health sector budget only 1.39% of GDP.

Challenges affecting the improvement of patient safety in India

Issues related to personnel

- Health workforce is overburdened, under skilled
- Inadequate and inequitable distribution of health care providers
- Poor teamwork among health care professionals
- The relationship between health care provider and consumer is less trusting
- Communication gap between providers and consumers increasing due to more complex health care
- Lack of accountability
- Patient expectations & number of complaints increasing
- There is no practice of root cause analysis, incidents not reported and weakness in the system remains
- More involvement of mass media and NGOs to protect patient rights

Strategies to promote patient safety in India

- Sensitization to the importance of patient safety
- Discussion of reasons things go wrong
- Writing guidelines for common emergencies
- Implementing care pathways
- Start anonymous and confidential clinical incident reporting
- Analysis of all unexpected deaths to understand why and what went wrong and what lessons can be learnt
- Supporting the health professionals if and when they make genuine mistakes, ensuring lessons are learnt
- Training the health professionals on communication and teamwork
- Valuing patients and respecting them and providing the best possible care. Establish good system to deal with complaints, litigation etc. Writing patient information leaflets

Issues related to system

- No conducive work environment
- Complex interventions and technology
- Cost and resource constraints
- Infrastructure inadequacy to provide services
- Weak Governance/ Management/ Corruption
- Lack of political will
- Lack of health care regulation, but the Government is working to introduce regulation at all levels of health care delivery (minimum standards)
- Accreditation is voluntary, not mandatory
- There is no single system to monitor the functioning of hospitals
- Limited resources in the health facility
- Inadequate institutional support
- Large unregulated private sector
- Lack of policy
- The current marketing strategy
- Ensuring health care quality consistent across the country
- Reducing the cost of health care delivery without reducing quality

Patient safety is everybody's concern. It is the responsibility of every health-care professional to create a safety culture in their work area. It is essential that we all work together to improve patient safety. **For more information email nanthini_subbiah@yahoo.com**

References:

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3. www.searo.who.int/.../Quality_and_safety_in_health_care_HSD-297-First_Regional_Workshop_on_Patient_Safety.pdf
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Other Patient Safety News

PFPS at IAPO's Global Patients Congress

Patient advocates have called for more meaningful engagement in health-care design and delivery at the **International Alliance of Patients' Organizations (IAPO)** 4th Global Patients Congress in Istanbul, Turkey in February 2010.

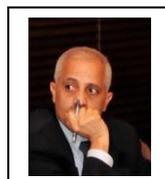
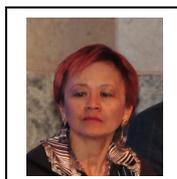
The Congress brought together over 100 delegates from around the world, representing patients and other stakeholders in health to address the subject of **Strengthening Health-care Systems Globally: The Value of Patient Engagement**. Patient engagement has been a principal focus of IAPO's work since its foundation. IAPO advocates for patients and patients' organizations to share the responsibility of health care policy-making through meaningful and supported engagement at all levels and at all points of decision-making.

"We have identified models of patient and public engagement that are successful and can serve as catalysts for further change within health care systems. One example is the European Medicines Agency, where patients play an active role in a number of committees..." says Hussain Jafri, Chair of IAPO. "Real concerns can be aired and appropriate measures taken that empower patients, health professionals and authorities alike."

PFPS was grateful for the opportunity to highlight its work through a session 'Patient Involvement in Patient Safety' ran by Bev Hurst, Jolanta Bilinska, Robinah Kaitiritimba and Anna Lee. Presentations highlighted different case studies of involvement and opportunities for patient engagement in safety issues. Following the presentations, participants were asked what the patient safety priorities were in their regions and the barriers to involvement. The discussion indicated the importance of medication errors, counterfeit drugs and the lack of patient information on the potential safety dangers of generic substitution, as well as the issue of hospital acquired infection. Representatives then shared some of their own examples of ways to advocate to improve patient safety. The session was well received with new connections made and a number of requests for further information.

For more information on IAPO's Global Patients Congress visit the website: www.patientsorganizations.org

Photos of PFPS Champions that attended IAPO's Congress as representatives of their organizations from top left clockwise: Robinah Kaitiritimba - Uganda National Health Consumers Organization, Eva Maria Ruiz de Castilla - Esperantra Peru, Hussain Jafri - Alzheimer's Pakistan & Chair of IAPO, Durhane Wong-Rieger - Consumer Advocare Network Canada & IAPO Board, Said El Kharrazi - Moroccan Kidney Federation, Bev Hurst - National Concern for Healthcare Infection UK, Kathy Kovaks Burns - Best Medicines Coalition Canada, Maka Danelia - Georgian Alliance for Patient Safety, Jolanta Bilinska - Patient Safety Foundation Poland & IAPO Board.



'It was a fantastic opportunity to represent both NCHI and Patients for Patient Safety Champions. It was inspiring to see so many patient advocates from all over the world knowing that we were all coming together for one purpose...to help build a safer healthcare system for all who use it. It was great to catch up with fellow patient advocates and to meet and make friends with many new ones.' Bev Hurst, PFPS Champion, UK

WHO Patient Safety

WHO SAVE LIVES: Clean Your Hands

The First Global Patient Safety Challenge team is pleased to announce that the 2010 call to action has been answered and the results went far beyond expectations. Although a goal of 10 000 was set, more than 11 500 health-care facilities registered their commitment with WHO to improve hand hygiene at the point of patient care!

The commitment and enthusiasm has been incredible at a time when many countries and health-care facilities face increasing pressure and barriers to providing quality care.

The current number of registered health-care facilities stands at 11 915 from 141 countries! It is exciting to see both the number of registered facilities and the numbers of countries involved continuing to rise. This demonstrates the potential sustainability of both the global campaign, as well as local actions to improving hand hygiene and patient safety on an ongoing basis.

The **SAVE LIVES: Clean Your Hands** web pages currently host a range of technical tools and resources to support the improvement of hand hygiene at the point of patient care, on every day of every year, not just on 5 May. Advocacy tools are also available, including a video message from Professor Didier Pittet, which can be used at any time when events or meetings are held to promote hand hygiene among health-care workers. New information on the evidence for hand hygiene is also now available.

WHO CleanHandsNet is an informal network which brings together national / sub national level activities promoting hand hygiene in health care, in order to share experiences and learn from each other's campaigns. Currently there are over 40 recognised campaigns in different parts of the world.

For more information on the programme go to www.who.int/gpsc/5may



World Health Organization

Patient Safety
A World Alliance for Safer Health Care

New WHO Videos

Patient advocates and healthcare professionals from around the world share stories about patient safety and partnerships.



A series of new films have been developed for the PFPS programme, featuring interviews with patients around the world, now available to download from www.patientsafety.org

Next time...

If you have any news to share for the next newsletter, please send contributions through to Anna, at leea@who.int before 25 September 2010.