EUNetPaS
European Union Network for Patient Safety

Promotion of Education for Patient Safety:
creating a European network

Charles Bruneau
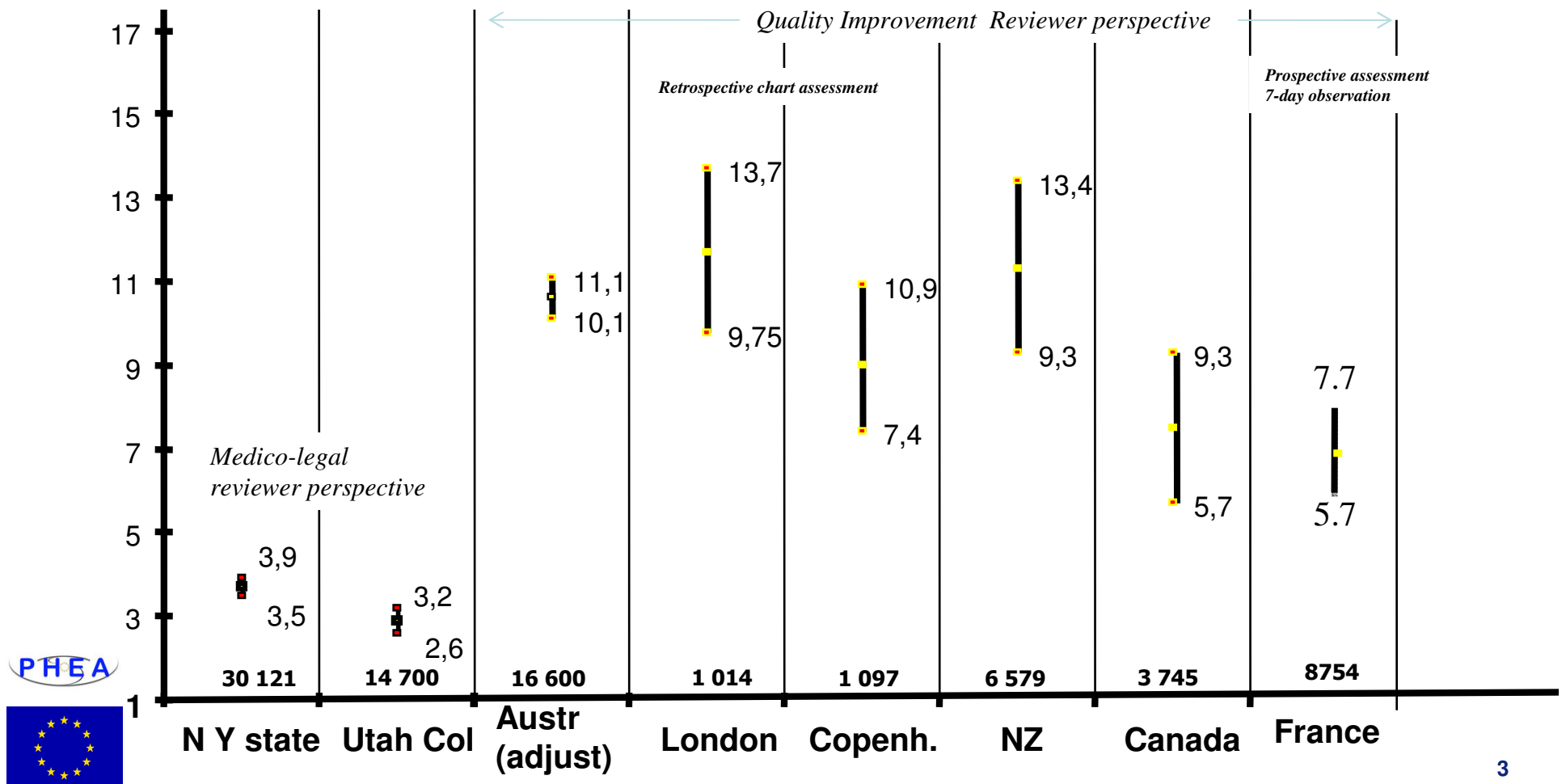French Authority for Health

DEFINITION

Patient Safety:

The avoidance, prevention and amelioration of adverse outcomes or injuries stemming from the process of health care.
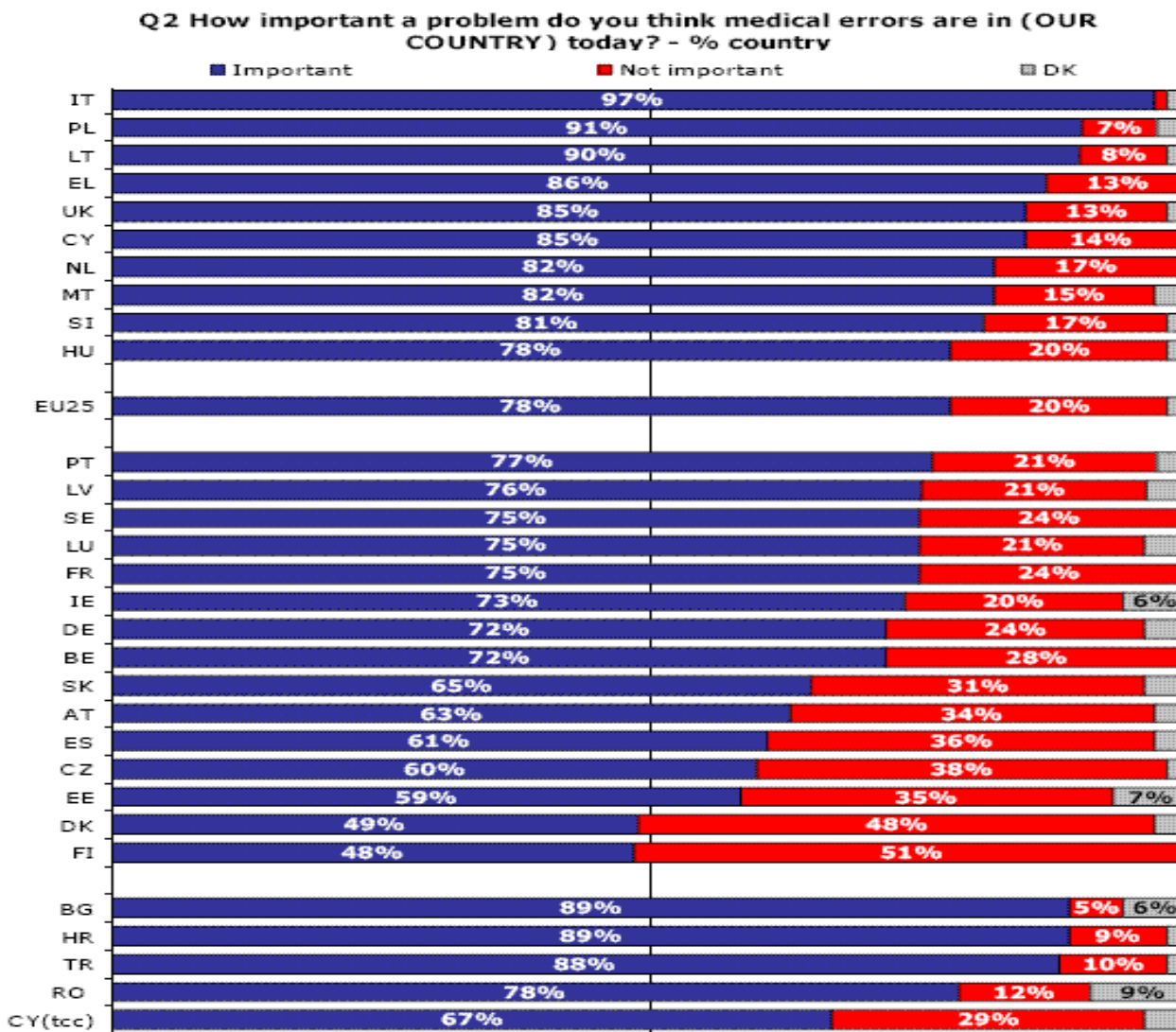
(Charles Vincent)

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Why a priority?

% of patients experiencing AE during hospitalisation

Quality Improvement Reviewer perspective

Retrospective chart assessment

Prospective assessment 7-day observation

Medico-legal reviewer perspective

13,7

13,4

11,1
10,1

10,9
9,75

9,3

9,3

7.7

7,4

5,7

5.7

3,9
3,5

3,2
2,6

| 30 121 | 14 700 | 16 600 | 1 014 | 1 097 | 6 579 | 3 745 | 8754 |
| N Y state | Utah Col | Austr (adjust) | London | Copenh. | NZ | Canada | France |

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78% of the EU population considers that Medical Errors are an important issue
Special Eurobarometer Medical Errors 2006

Q2 How important a problem do you think medical errors are in (OUR COUNTRY) today? - % country

■ Important   ■ Not important   ▣ DK

Country	Important	Not important	DK
IT	97%		
PL	91%	7%	
LT	90%	8%	
EL	86%	13%	
UK	85%	13%	
CY	85%	14%	
NL	82%	17%	
MT	82%	15%	
SI	81%	17%	
HU	78%	20%	
EU25	78%	20%	
PT	77%	21%	
LV	76%	21%	
SE	75%	24%	
LU	75%	21%	
FR	75%	24%	
IE	73%	20%	6%
DE	72%	24%	
BE	72%	28%	
SK	65%	31%	
AT	63%	34%	
ES	61%	36%	
CZ	60%	38%	
EE	59%	35%	7%
DK	49%	48%	
FI	48%	51%	
BG	89%	5%	6%
HR	89%	9%	
TR	88%	10%	
RO	78%	12%	9%
CY(tcc)	67%	29%	

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WHY at European level?

- Mobility of citizens and healthcare professionals

- Continuous medical progress *that* challenge *health care organisations*

Universal Access to good quality care

is included in the **common values and principles** to guide EU health systems, adopted in June 2006 by the Ministers of Health of the 25 Member States

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**HIGH LEVEL GROUP ON HEALTH SERVICES
AND MEDICAL CARE PATIENT SAFETY WORKING GROUP**

RECOMMENDATION OF OCTOBER 2, 2007

The promotion of safety issues at national levels

National policies and programmes

Empowerment of citizens and patients

Patient safety cultures, leadership and clinical governance

Reporting and learning systems

Redress mechanisms

Knowledge and evidence to implement change

Involvement of stakeholders

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**HIGH LEVEL GROUP ON HEALTH SERVICES
AND MEDICAL CARE PATIENT SAFETY WORKING GROUP**

The promotion of safety issues at national levels (suite)

Develop education and training of health professionals and all other staff:

- A multidisciplinary approach in under-graduate, post-graduate and continuing professional development

- Effective links and collaboration with universities and other involved organisations

- Development of core competencies relative to the required knowledge, attitudes and skills

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WHAT ARE THE RECOMMENDATIONS AT EU LEVEL?

Common definitions, terminology and classification

Common indicators

A research agenda on effectiveness and economic impact

A set of interventions and solutions

Sharing and dissemination activities

Involvement of all stakeholders

A single integrated umbrella network including all MS, international organisations and stakeholders

**A NETWORK ON PATIENT SAFETY MOBILIZING
A MAXIMUM OF COUNTRIES WITH A FLEXIBLE MENU**

– **A 30 month Project mobilizing the 27 EU Member States, the main EU stake holders and international organisations**

– **Proposing different levels of engagement for associated partners:**

  – **Supervisory engagement WP 8,9,10:**

  ✓ **national coordination of sub-network, steering committee meetings**

  ✓ **collection of information via interviews of national stake holders**

  ✓ **dissemination via conferences or integration of EUNetPaS materials in national campaigns**

  ✓ **impact assessment via EUNetPaS indicators**

  – **Medication errors testing in HCOs: WP 4**

  – **Proactive engagement WP 1,2,3,4,8,9,10**

    experts sharing their experience and proposing a repertoire of intervention strategies.

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ARCHITECTURE

STEERING COMMITTEE WITH ALL PARTNERS

Horizontal WP	PROJECT COORDINATION **Management of the project secretariat**	EVALUATION **Audit of the project**	DISSEMINATION **Create awareness via Network**	
Core WP	**Patient Safety culture** What was our starting point? How do we improve?	**Education** How far medical stake holders are educated ? What promotion for that goal?	**Reporting and learning systems** How to learn from errors?	**Pilot Testing** Can we make fast Progress together?
	Mapping exercise Data Base of Best Practices Observatory?	**Mapping exercise Involvement of stakeholders** **Pilots: medical and nursing curricula**	**Mapping exercise Identifying tools Legal aspects** **Transferring common principles and tools**	**Developing a pilot study : medication error** **Adapting PS solutions** **Training**
Pilot testing	**Field Transfer & Utilisation of tools and best practices Involvement in the proposed pilots**			

PHSA

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Ensuring stakeholder involvement
around national contact points…

- ➤ National Institutions
  - ➤ Health Care Quality agencies
  - ➤ Dedicated PS agencies
  - ➤ Dedicated departments or agencies of MoH   **National platforms**
- ➤ Decision makers
- ➤ Healthcare professionals
- ➤ Research teams on P. S.
- ➤ Patients

This is illustrated by successful national models, for example :
- ▪ The Danish Society for Patient Safety
- ▪ The Scottish Patient Safety Alliance
- ▪ The German coalition for Patient Safety
- ▪ The Dutch Patient Safety Platform

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Rationale of EUNetPaS: PSWG recommendation 2007

- Support development of national policies and programs WP 1,8,9

- Empower citizens and patients WP 1,2,9

- Develop positive patient safety cultures, leadership and clinical governance at the health care setting level WP 1, *2*

- Promote Education and training of health professionals and all other staff WP 2

- Establish reporting and learning mechanisms WP 3

- Develop knowledge and evidence base for patient safety to implement change for safer care WP 1,3,4

- Develop indicators for PS for different HC settings WP 1,4,9

- Engage stakeholders WP 1,2,3,4,8,9,10

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WP 2 EDUCATION and TRAINING

- **Greece (leader),** Spain, UK, Germany, Ireland, Lithuania, EPF, CPME, EFN, ESQH

- **Deliverable: Guidelines for education in Patient Safety**

- **Work plan and milestones**
  - **Feb. 2008**   **Work plan**
  - **Dec. 2008**   **Collection of best practices**

    PS core competencies and generic education programs
  - **June 2009**   **Medical Paradigm, Nursing paradigm, CPD/higher education, Patient/carers**

    Public draft for Guide line for core competencies development

    Identification of institutions for pilot testing
  - **June 2009**   **Pilot testing**

WP2 Education and training Methodology

Data collection from:
- Documents from International organizations
- Documents from international experts
- Specific studies
- Qualitative methods with experts or MS

Define a framework for core competences
  and learning topics in PS

Draft guides and recommendations
And levels of specialization for the target population

Learning Topics for professionals

| Taxonomy | Adverse events | Risk management | Evidence for Best practices | Communication |

Knowledge	Skills	Behaviours/ attitudes
-Factors asociated to errors and AE in health care -Understand Risk Management -Understand patients suffering from AEs	-Avoid blame culture -Use of tools (RCA, FMA) -Use clinical evidence -Empathy with patients	-Apply safe priniciples in work place -Talk about errors and Communicate AE -Communication with patients -Get involved in proactive risk management

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Training in PS for professionals

MASTER IN PS
- Concepts. Epidemiology
- Risk Management. Quality Assurance
- Clinical Practice and EBM
- Medication Errors
- AEs analysis
- Legal aspects
- Communication

RISK MANAGEMENT:
- Risk Management tools
- Electronic resources for RM
- Epidemiology and Prevention of AE
- EBM

BASIC CONCEPTS:
- AE, errors, etc.
- Risk Management.
- Notification systems
- Communication
- International Strategies

MASTER

EXPERT

BASIC

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WP EDU Pilot Testing

TARGET POPULATION:

- **Pre Graduate**:

  Basic level in some Faculties and Nurse Schools

- **Post Graduate:**

  Basic or Expert level in some specialities

- **Professionals:**

  Expert or Master level

- **Patients:**

  Basic level for leaders

EVALUATION:

- **Satisfaction**
- **Knowledge/attitude (pre-post)**

EUNetPaS Outcomes and Deliverables

- **Advice to Member States and promotion of coherence at EU level through recommendations and the proposition of common tools**

  - Culture measurement tool,

  - Guidelines for education

  - Library of methods for reporting and learning systems

  - Rapid response mechanism for sharing high priority patient safety issues or solutions between all member states

  - Medication safety recommendation

EUNetPaS Outcomes and Deliverables

- **Impact:**
  - Make available existing knowledge and know-how
  - Acquire new knowledge
  - Evaluate the uptake of tools and recommendations
  - Develop a EU community of hospitals involved in PS
  - Create a sustainable european network

CONCLUSION

EUNetPaS

provides a tremendous challenge…

but a real opportunity

to improve Patient Safety at the EU level,

if we coordinate our efforts to achieve common objectives

N.B. The EC launched a public consultation on March 25 for 8 weeks at http://ec.europa.eu/health