

### **EUNetPaS**

**European Union Network for Patient Safety** 

PSQCWG 24 September 2009





#### **Patient Safety:**

Freedom for a patient from unnecessary harm or potential harm associated with healthcare.

COUNCIL RECOMMENDATION on patient safety, including the prevention and control of healthcare associated infections







#### **OBJECTIVES** of EUNetPaS

- To produce European added value of Member States collaboration by mutual support, and exchange of ideas and materials for accelerating progress
- To set up a pan European NETWORK for patient safety involving stake holders organised around national coordinators (National platforms)
- To pilot tools to reduce medication errors as a first step
- To promote education, a change in culture and a learning environment
- To propose a basis for research projects for better safety.







A platform at EU level for collaboration and networking between:

- 27 Member States
- international organizations
- stakeholders in the field of Patient Safety (decision makers, health care professionals, patients, researchers ...)







- National Institutions on Patient Safety (PS):
  - ➤ Health Care Quality agencies
  - ➤ Dedicated PS agencies or Department
- Decision makers and financers
- Healthcare professionals
- Patient representatives
- Research teams on PS

National platforms



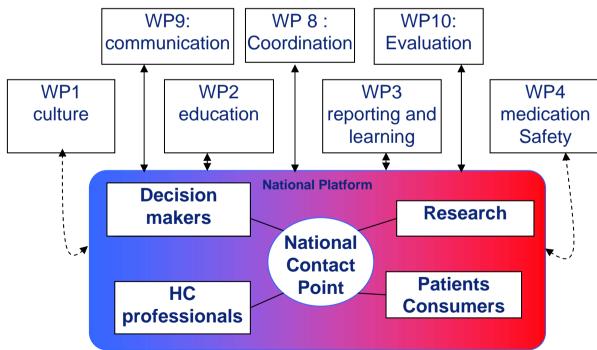




















# Network development National Patient Safety platforms

- Austria
- Belgium
- Denmark
- Finland
- France
- Germany

- Greece
- Ireland
- Poland
- Spain
- Sweden
- UK...







### WP1 Patient Safety Culture

 Netherlands CBO (leader), Spain, Lithuania, European Fed. of Nurses (EFN), European Society of Quality in Healthcare (ESQH), OECD

#### Objective 2:

Building on previous work and using the network, collect and exchange information regarding PS culture practices and indicators in MS and make it accessible to stakeholders through a web based system.

#### Objective 3:

Using the organizational framework of the network (national contact points coordinating national platforms) and the expertise of national agencies, define and evaluate instruments for assessing \$\mathbb{P}\mathbb{S}\mathbb{C}\mathbb{UNetPa}\mathbb{S}\mathbb{EUNetPa}\mathbb{S}





## WP1: Work plan



- End 08 Litterature review and situation analysis
- June 09 Selection of measurement tools and collection of practical experience using them leading to a compendium of good practices
- September to November 09
   Testing of instruments in Member States
- Dec. 09 PS Culture Indicators and the links between PSC measurements and organisational and clinical performance
- June 2010 Recommendations on the use of PSC measurement tools



# WP1:Information sharing Matrix looking for info and contact in the 27 MS

#### Culture:

PS culture surveys?

PS culture tools?

PS indicators (national, regional, HCO level)

Medication safety indicators

#### Learning activities:

organisations involved

Type (under graduate, post graduate, MSc programme...)

Delivery platform (seminar, book, distance learning...)

**Duration and renewal** 

Target audience

Expected outcomes and evaluation

#### Reporting and learning systems:

description

funding

organisation and contact person

Good practices in reducing medication errors in hospitals.

description

efficiency

contact







## WP1:Situation Analysis

Latest developments



A second version of the Database is online since July 2009

.user friendly

.very simple access

A new reminder will be sent to NCPs to urge them to share validated national information with partners

The first objective of EUNetPaS is

"To produce European added value of Member States collaboration by mutual support, and exchange of ideas and materials for accelerating progress"



# Patient Safety Culture Instruments – latest developments

- Feed back have been received form 24
   Member States plus Norway, Switzerland and Iceland regarding the usability of the proposed PSCIs
- Pilot test of PSCIs will be organised in Lithuania as scheduled.







# Patient Safety Culture – performance indicators

- A further literature search on links between PSC measurements and organisational or clinical performance
- Collection of experiences in MS on the links between PSC measurements and patient safety indicators of organisational and clinical performance
- The patient safety indicators (PSI) questionnaire should be finalized during the next WP1 meeting to be held 2nd October in Madrid.





# WP2 Education and Training

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

Promote PS Education and Training which is inspired by our common principles and values through ...

Dec. 2008 Collection of basic competences

and teaching programs in Patient

Safety (PS)

Jan. 2010 Education and training Guideline

Jan. 2010 – June 2010 testing







| Country  | number of questionnaires |
|--|--------------------------|
| Austria  | 2                        |
| Denmark  | 3                        |
| Ireland  | 2                        |
| Romania  | 2                        |
| Cyprus   | 1                        |
| Spain  | 10                       |
| Germany: report summarizing the results of 17 activities |                          |







Finalisation of Education and Training Draft Guideline: Oct. 2010

Validation of the draft by SC in Athens: Jan. 2010

Good practices illustrating the guide line recommendations will be proposed by NCPs to feed the "knowledge map". (CPME, EFN, GCPS).

Pilot testing under discussion with Spain and Cyprus







 DK National Board of Health (leader), Sweden, Lithuania, Greece, Portugal, Netherlands, UK, Finland, Slovakia, Italy, Poland, Hungary, Norway, Latvia, Germany, Romania

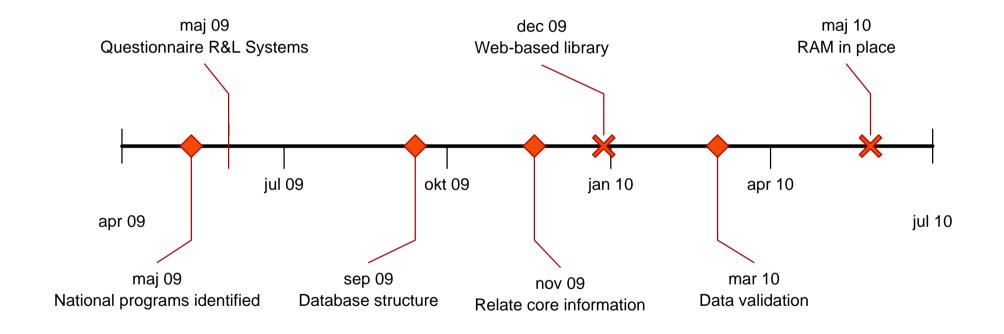
#### Objectives

- to establish European-wide collation, analysis and sharing of information on patient safety problems drawn from national/regional level patient safety reporting and learning systems.
- to make the information available to all Member States















## Data collection National Contact Points



## 64 Regional or National Reporting and Learning Systems

2 Member States > 15 systems

2 Member States = 7 systems

1 Member State = 6 systems

3 Member States = 3 systems

2 Member States = 2 systems

1 Member State = 1 system

17 Member States = 0 system







- a web-based library on best practices
  - legal framework
  - organisational structure
  - culture
  - data structure
- a sub-network of reporting systems and experts







- a web-based library on R&L Systems in Europe
  - organisational and Data structure
- Rapid Alert Mechanism
  - sharing high-priority patient safety issues
- EU patient safety solution bank
  - build upon existing data







- A more detailed questionnaire will be sent shortly to the first round contact persons to describe their reporting systems
- This second round of data collection describing MS experiences in developing and implementing reporting and learning systems will be achieved May 15th.







- European Federation of Hospitals HOPE (leader), Finland, Belgium, Austria, EFN (nurses), PGEU (pharmacists), EAHP
- Pilot testing: Lithuania, Denmark, Netherlands, France, Portugal, Greece, Ireland, Italy

#### - Objectives:

To identify good practices in reducing medication errors in hospital, select a number of those and implement them in hospitals (3 hospitals in each of the 10 participating member states)

To create a community with those hospitals to exchange at the level of the health professionals directly involved in clinical care





# WP 4 Pilot Implementation on Medication Safety

#### Work plan

- Oct.08 Collection and selection of good practices
- Jan.09 Translation of good practices into implementation tools
- March 09 Selection of participating hospitals
- April 09 Field implementation

Mid term evaluation process going on











## Collection and selection of good practices



1)Template (February - March 2008)

Description of the example, reason, evidence, cost of the implementation, hospital contacts

2) Data collection in two stages (98 templates collected from 23 MS):

1st round 11 April - 5 June 2008 (29 templates) 2nd round 5 June - 12 July 2008 (34 templates) 43 additional templates received after the 12 July

3) Pre-selection of "good practices" (11 templates)

Matrix on transferability developed and filled in by the Core Group

Selection of the final <u>7 good practices</u> to be implemented by hospitals







- -the safety vest (do not disturb during medicine preparation in wards)
- -the sleep card (guideline to reduce unnecessary treatment by sleeping pills)
- -bed dispensation (preparation and administration of medicines by the same person reduces the risk of confusion)
- -medication reconciliation at discharge (written discharge medication given to the patient and sent to the GP and community pharmacist) and at admission.







### Hospital selection



5 to 25 hospitals have been selected in 11 MS:

**Austria** 

Denmark

Greece

Lithuania

**Portugal** 

France

Belgium

**Finland** 

**Ireland** 

**Netherlands** 

Italy







- List of selected hospitals and corresponding GPs
- Midterm evaluation process of the field testing going on
- Development of an Extranet forum for participating hospitals.







#### DISSEMINATION



-April. 2008 IFQS, Paris

-Sept. 2008 EUNetPaS meeting, Paris

-Oct. 2008 Health Forum, Gastein

ISQua, Copenhagen

-Nov 2008 PFUE ministerial conference Paris

**Health First Europe, Brussels** 

-April 2009 IFQS, Berlin

**PS Congress Birmingham** 

-Oct. 2009 ISQua, Dublin

-April 2010 IFQS, Nice

-June 2010 EUNetPaS final meeting, Brussels







- WP progress evaluation
  - Questionnaires sent to Associated Partners every 6 months
- Network evaluation
- Impact assessment at the end of the project
- Intermediate and final reports to EAHC







#### COORDINATION



-Feb. 20th Contract Amendment (partner

replacement)

status EAHC answer expected very soon

-Jul. 23<sup>rd</sup> Interim report sent

status: EAHC payment expected very soon

Issue we need to have the agreement of EAHC regarding the amendment before initiating the payment instalment.







- -Monthly Executive Board teleconferences
- -Coordination with other EU patient Safety networks
  - LINNEAUS EURO PC
  - "Quality and safety in European Union hospitals: a research-based guide for implementing best practice and a framework for assessing performance".
  - EUNetPaS activities have been presented to the ENRICH network



-Sustainability





Promote coherence at EU level through recommendations and proposition of common tools

- Culture measurement tool,
- Guidelines for education
- Library of methods for reporting and learning systems implementation
- •Rapid response mechanism for sharing high priority patient safety issues or solutions between all member states
- Medication safety recommendation
- •EU community of Hospitals involved in PS
- Sustainable European Network on PS



PHEA





#### Implementation of the Council Recommendation

EU field testing of tools and solutions validated by EUNetPaS and other international projects (WHO, FP 7...)

- Involving the 27 MS
- Involving primary care?
- Addressing the 4 pillars of EUNetPaS
  - Culture
  - Education
- PH 5 A
- Reporting and learning
- Patient Safety solutions





### Implementation follow up



Example of solutions relevant to MS needs

- -medication safety
- -safe surgery

#### Follow up:

-Implementation SOPs based on EUNetPaS recommendations with clear focus on culture measurement, training of participants reporting of adverse events and RCA patient empowerment

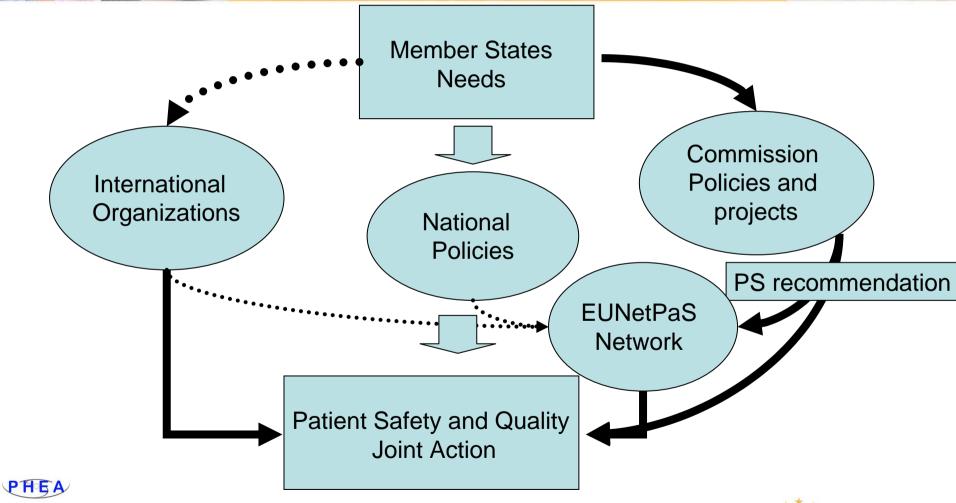
PHEA-impact evaluation





## life after EUNetPaS?





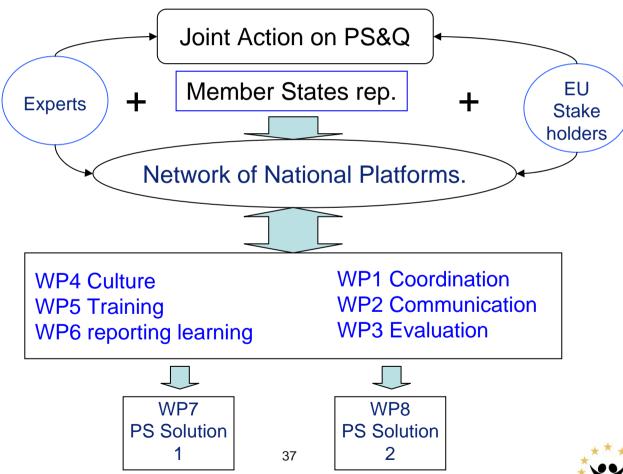


















#### A life after EUNetPaS?



Joint Action: May 2010 SANCO call

Starting date mid 2011

Member States support and commitment to participate to the action

Commission support







#### International coordination &



Commission co-funding should provide an opportunity for MS to engage in common actions relevant to their needs and to adapt and implement solutions which have been validated at international level (i.e. High 5 project).

Development and Implementation of good practices will contribute to the improvement and harmonization of patient safety and quality of care in every Member States

Patient safety standards could be proposed at a later stage when convergence will ensure their relevance for all the Member States.









#### « Two sides of the same coin »







#### **EUNetPaS**

# demonstrates the ability of concerted EU actions

to improve Patient Safety and Quality of Care

Political consistency will be key to confirm success



# Acknowledgement to EUNetPaS 46 partners!



This paper was produced for a meeting organized by Health & Consumers DG and represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumers DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.