Patient Safety

Towards an Open Culture: reporting adverse events

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H:S Unit for Patient Safety
Patient Safety on the Healthcare Agenda

Adverse Event Studies

<table>
<thead>
<tr>
<th>Region</th>
<th>Year</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>New York</td>
<td>1991</td>
<td>3.7%</td>
</tr>
<tr>
<td>Colorado/Utah</td>
<td>1999</td>
<td>3.3%</td>
</tr>
<tr>
<td>Canada</td>
<td>2004</td>
<td>7.5%</td>
</tr>
<tr>
<td>UK</td>
<td>2000</td>
<td>11%</td>
</tr>
<tr>
<td>Denmark</td>
<td>2001</td>
<td>9%</td>
</tr>
<tr>
<td>France</td>
<td>2004</td>
<td>8.9%</td>
</tr>
<tr>
<td>New Zealand</td>
<td>2001</td>
<td>13%</td>
</tr>
<tr>
<td>Australia</td>
<td>1994</td>
<td>13%</td>
</tr>
</tbody>
</table>
### Adverse Events Studies

<table>
<thead>
<tr>
<th></th>
<th>Harvard</th>
<th>Australia</th>
<th>England</th>
<th>Denmark</th>
</tr>
</thead>
<tbody>
<tr>
<td>AE</td>
<td>2,028,923</td>
<td>7,128,649</td>
<td>6,031,934</td>
<td>4,935,218</td>
</tr>
<tr>
<td>Mild</td>
<td>56,8</td>
<td>46,6</td>
<td>66</td>
<td>34</td>
</tr>
<tr>
<td>Moderate</td>
<td>13,7</td>
<td>30,5</td>
<td>19</td>
<td>44</td>
</tr>
<tr>
<td>Severe</td>
<td>2,6</td>
<td>13,7</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>Deaths</td>
<td>275,934</td>
<td>349,304</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*) EU 15 excl. Greece and UK. Numbers are from 2000, except Germany where the number is from 1999, OECD Health Data 2003, 3rd ed.

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Example

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Why do accidents happen?

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Ref.: J. Reason
Root Cause Analysis

No securing of the scene of the accident

Harms
- Miscalculation of distance
- Unsuitable footwear

Hazards
- Slippery field

Ref.: J. Reason

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Reporting systems

- In order to solve problems we must know the nature of them
The Danish Reporting System for Learning – A no blame system

- Frontline Personnel report adverse events
- Hospital Owners analyze and act on the reports
- The National Board of Health communicates the learning
Teamwork

Danish Society for Patient Safety:

• Established December, 2001
• Board represents hospital owners, professions, industry, research, patient and consumer organizations
• Goal is to ensure Patient Safety aspects are a part of all decisions made in health care
• First aim: Make suggestions for a national reporting system
Patients’ experiences

Ref.: National survey on patients’ experiences, Denmark 2005

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Expert Recommendations for a Reporting System

Method
Focus group interviews
Questionnaire
Literature reviews

Results
Strictly confidential
Sharp distinction between disciplinary and learning functions
Local data should be transmitted anonymously to national level

Ref.: Andersen HB 2003
Hermann N et al. 2002
Reported adverse events

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Confidential versus anonymous reporting

Confidential 90%
Anonymous 10%
Other health personnel 75%
Physicians 25%
Setting up the network

- Same problems, same solutions
Methotrexate

- Chemotherapeutic drug for cancer, rheumatism, psoriasis etc.
- Often weekly dosage
- Overdose can be lethal
- 137 cases in the UK through 10 years
- 1 case per year in DK
The NPSA developed solutions

- Patient-held treatment record and information sheet
- Changes to IT prescribing support systems
- Repackaging the tablets

- Now a project in Denmark inspired by the NPSA solutions
Designing safer medical devices, medicines and systems

There are serious gaps in the knowledge necessary to design and produce safe products
Murphy's Law

"If anything can go wrong, it will"

Ref.: Design for Patient Safety, UK Design Council and UK Department of Health
How Hazardous is Health Care?

- **DANGEROUS** (≥1/1000)
  - Health Care

- **REGULATED**
  - Driving
  - Chemical Manufacturing
  - Chartered Flights

- **ULTRA-SAFE** (≤1/100,000)
  - Scheduled Airlines
  - European Railroads
  - Nuclear Power

Number of encounters for each fatality

Total lives lost per year

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After L. Leape
Training and tools for healthcare leadership, personnel & patients

1. Sharing of existing educational material, training tools and training methods that has proven successful
2. Collaboration on developing additional training material
3. Facilitation of Dialogue to exchange information and experience with national training programme
Tools for patients

Ten tips for patients

1. Speak up if you have any questions or concerns
   It is important that you understand your treatment, findings so far, and the reasons for your examination. Do not accept answers that you do not understand!

2. Let us know about your habits
   Please tell the staff if you are on medication, any alternative treatment, dietary supplements, natural health products, and if you are on a special diet. Let the staff know if you are allergic to medication, foods, or other.

3. Take notes during your stay
   Keep a journal of your experiences during your illness. In addition, it is usually a good idea to write down your questions, so that you will remember to ask the staff.

4. More ears listen better
   It is a good idea to bring a family member or a friend to consultations with the doctor on examinations and results. It is an advantage if more people hear what the doctor has to say, as this minimizes the risk of misunderstandings and misinterpretations.

5. You can let somebody else handle your consultation
   If you do not have the energy for it, you are welcome to ask the staff to go over your illness and treatment with one of your family members.

6. Check your personal data
   Check your name and personal identification number with the staff prior to every examination, treatment, or administration of medication.

7. Ask about your operation
   If you need surgery, it is a good idea to go over the procedure with the surgeon prior to the operation. Sometimes it is a good idea for the surgeon to mark the area of your body that needs surgery with a marker prior to the procedure.

8. Tell us if it hurts
   It is important that we know your symptoms. Even symptoms, which appear in other places than the affected area.

9. Before discharge from hospital
   Remember to ask about how the treatment is to continue and what you need to do yourself.

10. Know the medication you are taking
    Make sure you know the name of the medication you are taking, its effect, and how and how long to take it. Keep a list of the medication you are taking, make sure you know the side effects, and ask the staff about any types of foods or beverages, which may reduce the effect of the treatment.
The Patients’ Book
- A Guide to Safer Care

• Provides tools for patients to become aware of patient safety

• Outlines a typical course of treatment

• Provides suggestions for concrete questions for patients to ask

• Blank space to take notes, keep a pain journal, a list of medication etc.
No one can do this alone!
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