Patient safety

Patient safety is the absence of preventable harm to a patient during the health care process. It is estimated that 8-12% of patients admitted to a hospital in the EU suffer from adverse effects whilst receiving healthcare, such as healthcare-associated infections, errors in diagnosis and medication-related and surgical errors.

Much of the harm to patients is preventable, but the implementation of strategies to reduce harm varies widely across the EU. The European Commission plays a central role in helping member states to share best practices, and has taken a number of steps to improve patient safety in Europe.

The EU framework programmes for research and innovation have since 2007 supported the research in various aspects of health care with over 58 million EUR to improve patient safety, including the activities funded by DG Research and Innovation, and actions implemented by the Innovative Medicines Initiative in collaboration with the pharmaceutical industry.

DG Research and Innovation

DUQuE focused on our understanding of quality improvement in seven partner countries. The project team developed a catalogue of instruments to build a department and/or hospital-specific quality and safety programme.

HANDOVER analysed the patient transitions between the primary care setting and the hospital – patient discharge, transfer and rehabilitation processes are very different across the six countries studied in the project. The project team identified barriers and facilitators to good handover practices and developed a ‘handover toolbox’ with cost-effective interventions that can be tailored to specific local and institutional care setting. Their publications provide evidence for effective safety and quality improvement transition programmes, and their new data assessment methods informed the readmission health policy in Sweden and Italy.

LINNEAUS EURO–PC created a pan-European network of researchers and practitioners working on patient safety in primary care in the EU. The collaboration team from eight European countries developed a taxonomy of adverse events and errors, and identified best clinical practices to understand decision making and medication errors in primary care.
LIVING DONATION established an inventory of living-donation practices in Europe, promoted living donation as a way to increase organ availability, and developed tools that improve the quality and safety of living organ donations in Europe.

MONITORING MEDICINES focused on optimizing drug safety monitoring to enhance patient safety and achieve better health outcomes. The project worked on consumer reporting and preventing medication errors. The project team from ten countries developed additional methods to support policy decisions on disease prevention and resource management by identifying best clinical practice, understanding decision making and fostering patient empowerment.

ORCAB aimed to improve the quality and safety in the hospital. The project team from nine countries investigated the link between organisational culture, burnout, and quality of care.

QUASER produced an evidence-based guide for hospitals for implementing quality and safety improvement, and a framework for payers to assess the quality and safety of hospitals across the EU.

Innovative Medicines Initiative

ABIRISK aims to investigate the factors causing the immune response side effects triggered by treatment with biological molecules (proteins and monoclonal antibodies).

SAFE-T developed tools for prediction, detection and monitoring of drug-induced damage to the kidney, liver and vascular system with markers in patient blood and urine, which will lead to safer and faster translation of new drugs into clinical use.

WEB-RADR works to detect new drug side effects by data-mining public content on the web and social media. Patients will be able to directly report potential side effects thanks to a new mobile application.

Contact: RTD-H2020-PUBLIC-HEALTH@ec.europa.eu