PATIENT SAFETY

DR KHALID SHAHAB
ASSISTANT PROFESSOR
DEPARTMENT OF MEDICINE

OBJECTIVES

At the end of this session you will be able to understand

1. What is safety and what is patient safety
2. Types of error
3. Principle of patient safety
4. Different aspect and Measures to improve patient safety
5. Clinical governance and it importance

What is safety

S – Sense the error

A –Act to prevent

F –Follow the safety guideline

E –Enquire into accident/death

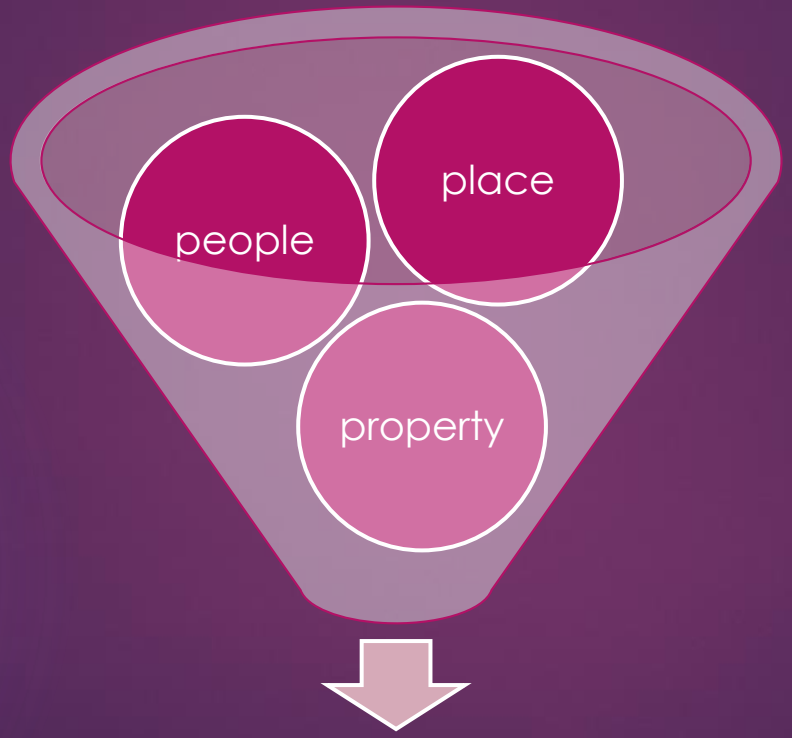
T –Take appropriate remedial measure

Y –Your responsibility

Why safety in Hospital

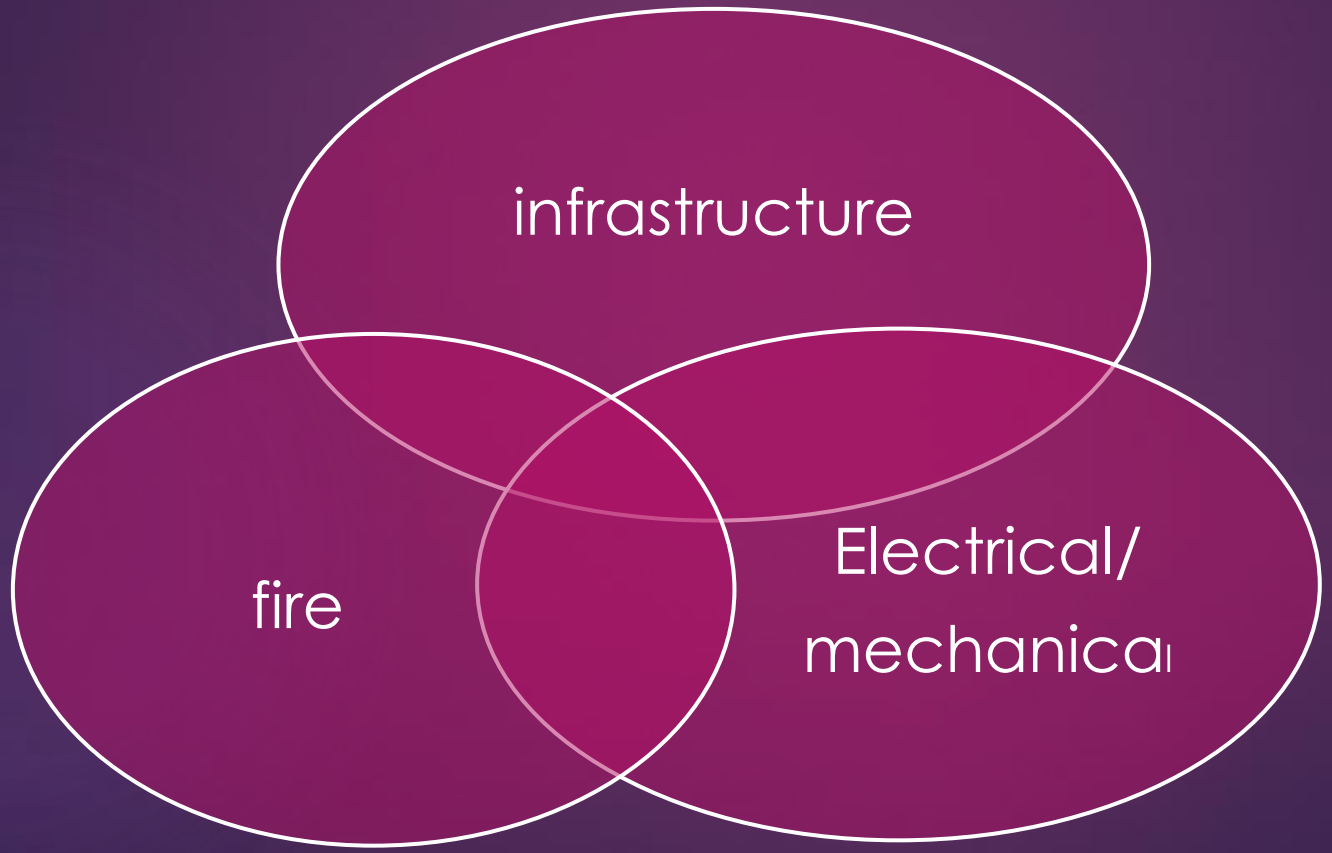
- Hospital is people intensive place
- Provide service to sick people around the clock
- People have access to enter any part of hospital anytime for advice and treatment
- Hospital atmosphere is filled with emotions, excitement, life and happiness, death and sorrow
- Hospital operates under continuous strains, it give rise to irritation, confrontation, conflict and aggression, threatening the life of hospital staff and hospital properties

Who's Safety

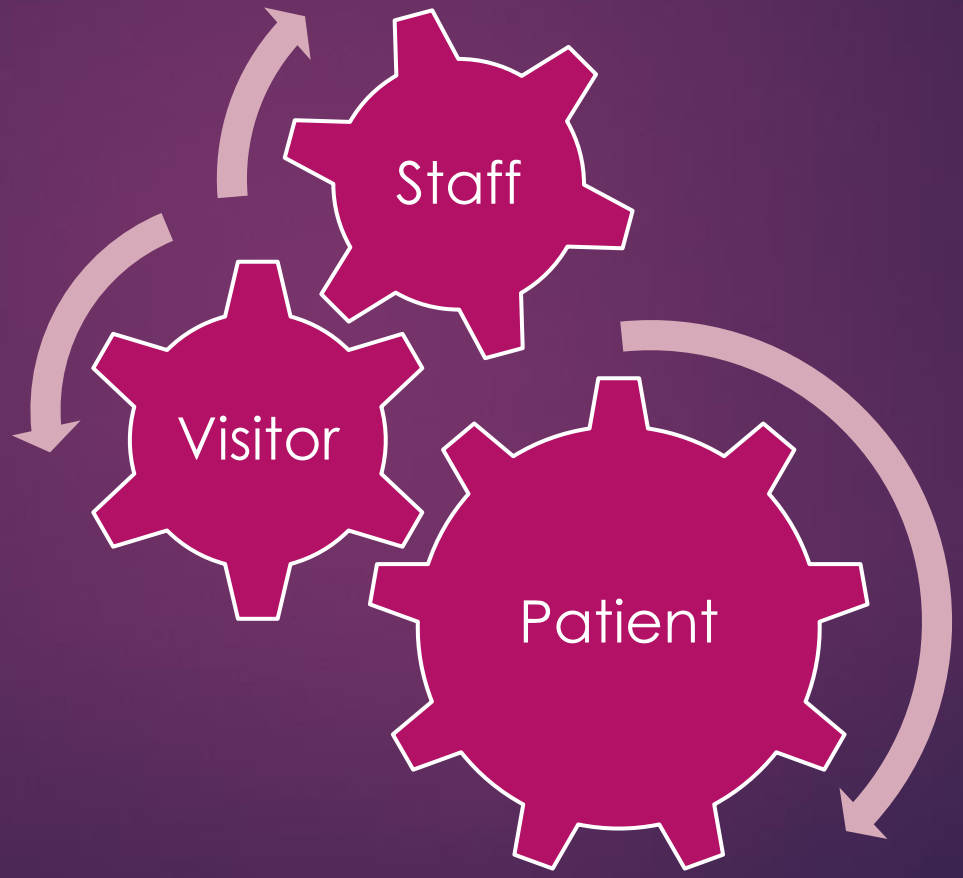


Hospital Safety

Safety of place



Safety of People



Patient Safety

- Patient safety is the absence of preventable harm to patient during the process of health care
- The discipline of patient safety is the coordinate effort to prevent harm to patient caused by process of heath care itself
- It is generally agreed upon that the meaning of patient safety is…….. “Please Do no harm”

Origin of patient safety concept

- HIPPORATIC OATH

I will prescribe regimens for the good of my patients according to my ability and my judgment and “ never do harm” to anyone

Current Environment

- Error and system failure repeated
- Action on known risk is very slow
- Detection systems in there infancy
- Many event not reported
- Understanding of causes limited
- Few example of successful scale up
- Limited measurement of impact
- Blame culture
- Defensiveness and secrecy

Medical Errors

- 1 in 10 patient admitted to hospital suffer an adverse event

The Institute of Medicine in their study found out that in USA

- ✓ Medical errors injured 1 in 25 hospital patients
- ✓ Kills about 44000 to 98000 patient every year
- ✓ Medical errors cost the united states billion of dollars each year

Why error

-In most cases fault is not willful negligence but systemic flows , inadequate communication and wide spread process variation and patient ignorance

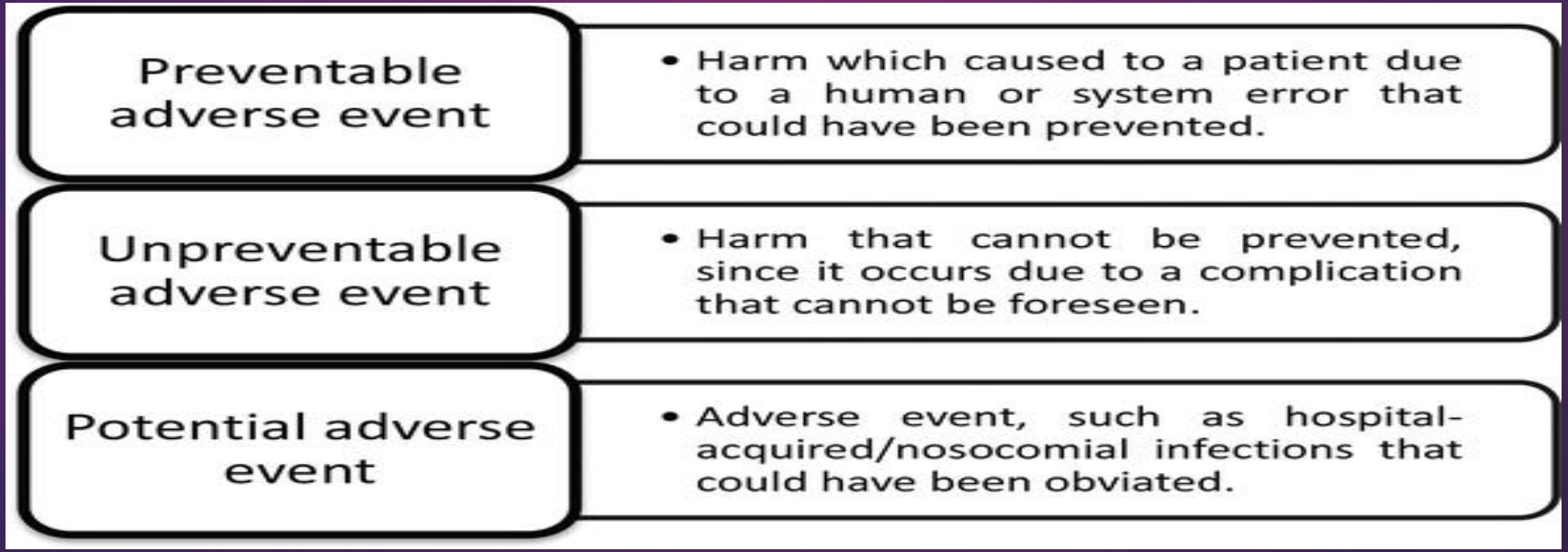
People responsible are the doctor, nurses , pharmacist, technician and Patient

Type of errors

- Adverse health care event
- Misdiagnosis
- Heath care near miss
- Adverse drug reaction
- Medication error
- Sentinel error

Adverse Health Care Event

Event or omission arising during clinical care and causing physical or psychological injury to a patient



Health Care Near Miss

- **Errors that occur in the process of providing medical care that are detected and corrected before a patient is harmed.**
- Focus on near miss

  no patient harm, therefore no blame

  No guilt

  No fear of litigation

  Focus on future prevention

Adverse Drug Reaction

- Any response to a drug which is noxious, unintended and occurs at doses used for prophylaxis, diagnosis or therapy
  - Predictable
  - Unpredictable

Adverse Drug Reactions

Type A (predictable)[2,3]	Type B (unpredictable)[2,3]
Overdosage Side effects Secondary effects Drug-drug interactions	Dose independent, not related with the pharmacologic actions of the drug, often serious and can cause death[4,5] Drug hypersensitivity Pseudoallergic Idiosyncrasy Intolerance

Medication Error

- Any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of health professional, patient or consumer

Table I
Types of medication errors

Description of error	Response rate
Wrong drug	15
Wrong route	1
Wrong dose	10
Wrong rate/frequency	6
Wrong time (including delay)	7
Wrong patient	4
Wrong administration technique	2
Omission	5
Wrong formulation/dosage form	1

Sentinel error

- Surgery on the wrong body part
- Surgery on the wrong patient
- Patient receiving the wrong medication

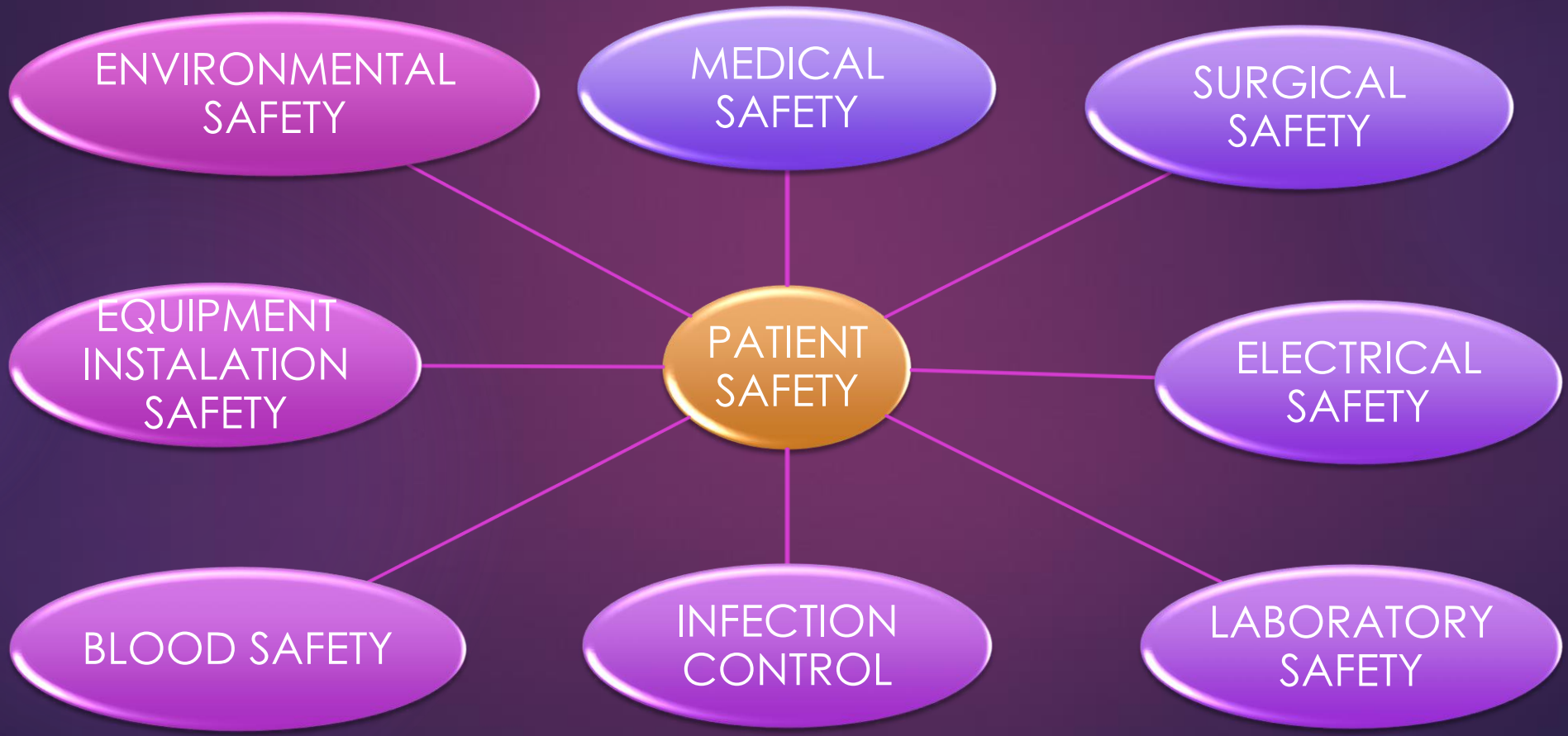
- An unanticipated event in health care system which may cause patient death or serious physical or psychological injury to patient

Principle of Patient Safety

- PROPER IDENTIFICATION OF PATEINT AND MATCHING TO THEIR CARE ELEMENTS
- PREVENTION OF PATIENT HANDOVER ERROR AND SAFETY DURING TRANPORTATION
- ASSESING MEDICAL ACCURACY WHILE GIVING CARE TO A PATIENT
- PERFORMANCE OF CORRECT PROCEDURE AT CORRECT BODYSITE
- TAKE APPROPRIATE PRECAUSTIONARY MEASURES TO AVIOD INFECTION

Principle of Patient Safety

TYPES OF SAFETY



ENVIRONMENTAL SAFETY

- Adequate light
- Adequate ventilation, exhaust fan
- Stair with hand rails
- Window-door-closer
- Slip preventing floor
- Fire extinguisher and fire alarms
- Prevent noise pollution
- Heavy and fixed beds
- Safe wheel chair and trolleys
- No water logging in bathrooms
- Call bell system for patients
- Adequate no of bed screens to maintain privacy of patients

MEDICAL SAFETY

- Illegible Writing prescription by doctors
- Wrong medicine or wrong dose or wrong patient
- Wrong injection, wrong dose or wrong patient, wrong route of administration
- Drip sets, air bubbles, over hydration, drip speed
- Oxygen flow check , empty gas cylinders
- Clear, written medication guidelines.
- Identification of each patient with similar patient names
- Proper handing taking over during change of shift
- Look alike and sound alike “ LASA”

SURGICAL SAFETY

- Consent of patient /relative in writing
- Proper identification of patient, name wrist band
- Proper identification mark if parts to be operated
- Pre-anesthetic check up
- Anesthetic safety
- Ensure no foreign body left inside
- Safety measures from ward to OT and coming back (safety check list)
- Prevention of surgical wound infections
- Use of surgical safety proforma in all operations
- Check safety code if available

Red for Allergy

Yellow for Fall risk

Purple for DNR

FIRE SAFETY

- Use fire proof material for construction
- Have Fire exit in all buildings
- Smoke detectors and water sprinklers on the roof of all floors
- Fire extinguishers in all areas
- Fire hydrants in all buildings
- Training in fire management

BLOOD SAFETY

- Proper grouping and cross matching
- Test of HIV, infection like hepatitis and VDRL
- Proper labeling of blood group and patient name
- Control mismatch reaction
- Standard operating procedure
- Inform adverse reaction to blood transfusion

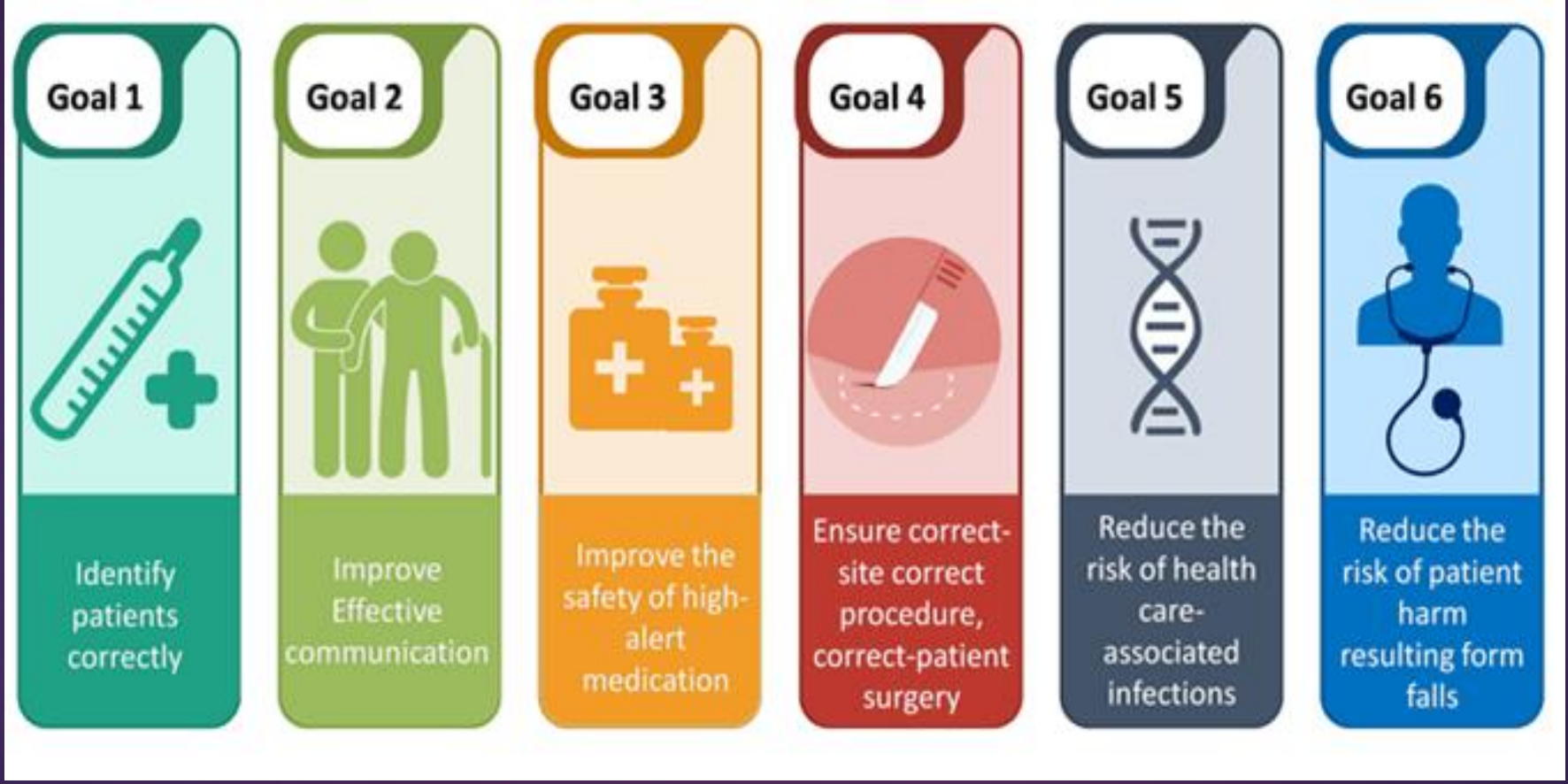
INFECTION CONTROL

Standard precautions include

1. Hand hygiene
2. Respiratory hygiene/ cough etiquette
3. Use of PPEs e.g. gloves, gown, masks and goggles
4. Safe work practices
5. Environmental cleaning (proper waste disposal)
6. Safe injection practices
7. Patient placement

HAND HYGINE AND COUGH ETIQUETTE

INTERNATIONAL PATIENT SAFETY GOALS




IPSG – 1
IDENTIFY THE PATIENT
CORRECTLY

CLINICAL GOVERNANCE

CLINCAL GOVERNANCE

- Clinical governance is a strategic framework for the development of high quality healthcare

a framework through which organization are **accountable** for **continuously improving** the **quality of their service** and **safeguarding high standards** of care by creating an environment in which excellence in clinical care will nourish

Clinical governance is a way of making sure that everyone who passes through health system is well cared for

Or

System that enable staff to work in the best possible way

Plus

Staff performing to the highest possible standards

7 Pillars of Clinical Governance

1. Clinical Effectiveness and Research
2. Audit
3. Risk Management
4. Education and Training
5. Patient and Public Involvement
6. Using Information and IT
7. Staffing and Staff Management

Health organisations also need Leadership, Team work, Accountability and a Culture of openness for Clinical Governance to be effective.


THANK
YOU