



Paediatric Patient Safety Workshop

Child Health Program

Dr. Cheryl R. Greenberg

Ms. Susan Fogg

Ms. Cheryl Susinski

Mr. Ron Van Denakker

March 31, 2008



The Case for a Culture of Patient Safety ... or What Happens when the PMT truly get Engaged

Background

- Align with Regional/Provincial/Federal directives
- Evidence for the need to enhance our approach to patient safety
- Strong CH Quality and Decision Support team
 - CH Quality plan enables CH Strategic plan which now places greater emphasis on patient safety
- Proactive measures undertaken to mitigate patient errors and promote a culture of patient safety by
 - Establishing & supporting strategic processes
 - Infrastructure to conduct pilot projects, solicit and sponsor initiatives
 - Ultimately based on evidence PMT incorporates into RHP

Program Management values concept of Exec Walk Around (Safer Health Care Now)



Administrative Perspective

Changing Behavior

- What Does It Take?
- What Are The Elements?
- What Does Commitment Look Like?
- On A Day To Day Basis?



Administrative Perspective

What Does It Take?

- Evidence:
 - Occurrence reporting
 - Quality indicators
 - Statistical reporting
 - Cost drivers – variance reporting
 - National/Provincial/Regional Directives



Administrative Perspective

What Are The Elements?

- Impact Analysis
 - Risk Assessment
 - Cost/Benefit
 - Cost – One-time vs. On-going
 - Implementation Plan
 - Evaluation
 - Results – More Evidence?



Administrative Perspective

What Does Commitment Look Like?

- Support/Sponsorship
 - Safety focused quality plan
 - Safety focused project support
 - Patient safety – standing agenda
 - Patient safety – health planning
 - Funding for safety learning



Administrative Perspective

On A Day To Day Basis?

- Visibility
 - Walk-Abouts
 - Be responsive to concerns
 - Look for champions to connect the dots
 - Recognize accomplishments
 - Celebrate success
 - Continuous reinforcement



Physician Perspective

- Where does physician responsibility lie?
- What are the meaningful motivators for MedRec?



Physician Perspective- Beyond Tacit Approval

Physicians as individual practitioners always have
“patient safety” as a priority

- But not a homogeneous group and there are generational issues

What is new is the overriding concept of working together to build safer organizations

- Making patient safety a priority– Is this safe? What is in the best interest of the child?
- Embedded now in medical and interprofessional education
- Physicians must take responsibility and be leaders but.....
- Physicians just one component
- Physicians can play a big role in promoting patient safety and “making change safely”



Clinical Leader Perspective

Recognizing site specific barriers, what key concepts apply to all sites?

- Engage, empower and support staff
- Have high expectations
- Manage the nay-sayers

How do you prioritize Quality Improvement initiatives?

- Look at your evidence; what problems require attention?
- Where are your strengths; who are the key people?



Clinical Leader Perspective

What does the implementation team need from the clinical director?

- Engagement - intervention and problem-solving when needed
- Support - attendance at all key meetings, including the initial meeting to frame the project; why this matters; the big picture, the human factor
- Profile for the initiative; local & national

What information does the clinical leader need from the team?

- Timely updates; progress reports on the successes and the barriers



Paediatric Patient Safety Workshop

Questions?