



**PaSQ experience
and next steps:
toward a permanent
European network
on
Patient safety
and Quality of Care**

Madrid,
October 21st, 2015



European context

- Patient mobility $\ll 1\%$
- HC professionals mobility?
- Council recommendation (2009) & conclusion (2014) on patient safety
- Growing interest of EU standardisation bodies for the HC market.
- Tentative standards for border line issues (esthetic surgery, cleft palate, chiropractors, alternative medicines...)

PaSQ = 61 partners: all MS and the main stakeholders



PaSQ: an EU network...

An EU-level platform for collaboration and networking between:

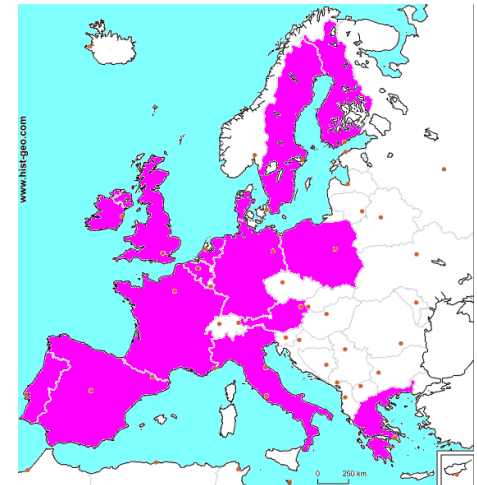
- 28 Member States + Norway
- International organisations: WHO, OECD, ISQua, EPSO
- European stakeholders in the field of healthcare (healthcare professionals, patients, institutions, scientists)



...of National Networks

- 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



Work Plan

Preparatory Work: April – Oct. 2012

.literature review

.glossary

Data collection: Nov. 2012 – Feb 2013

Implementation: Jul. 2013 – Dec. 2015

➤ Analysis: Oct. 2014 – Jan. 2016

Recommendations: Feb – March 2016

Exchange of good practices: April 2015 – March 2016

PaSQ networking approach

- Collective review and selection of good practices (SCPs & GOPs)
- Implementation of safe and transferable SCPs and GOPs
- Support based on exchange of experience and mutual learning
- Commitment of field workers and patients at all stages of the work through NCPs
- Development of IT tools to facilitate commitment and communication
- EU Convergence in the long term



PaSQ

European Union Network
for Patient Safety and
Quality of Care



Funded by
the Health Programme
of the European Union

PaSQ network today

- 28 NCPs composing the backbone of the PaSQ network
- Representatives of the main EU stakeholders and international organisations
- 61 partners represented by about 200 colleagues
- 220 HCOs participating in WP5 implementation
- 300 HC professionals involved in the Exchange Mechanism
- 700 contacts receiving PaSQ newsletter

PaSQ Added value

1 - About 35 events (international meetings, workshops, webinars, study tours) have been organised in the EU MS to:

- exchange information regarding selected clinical and organisational good practices

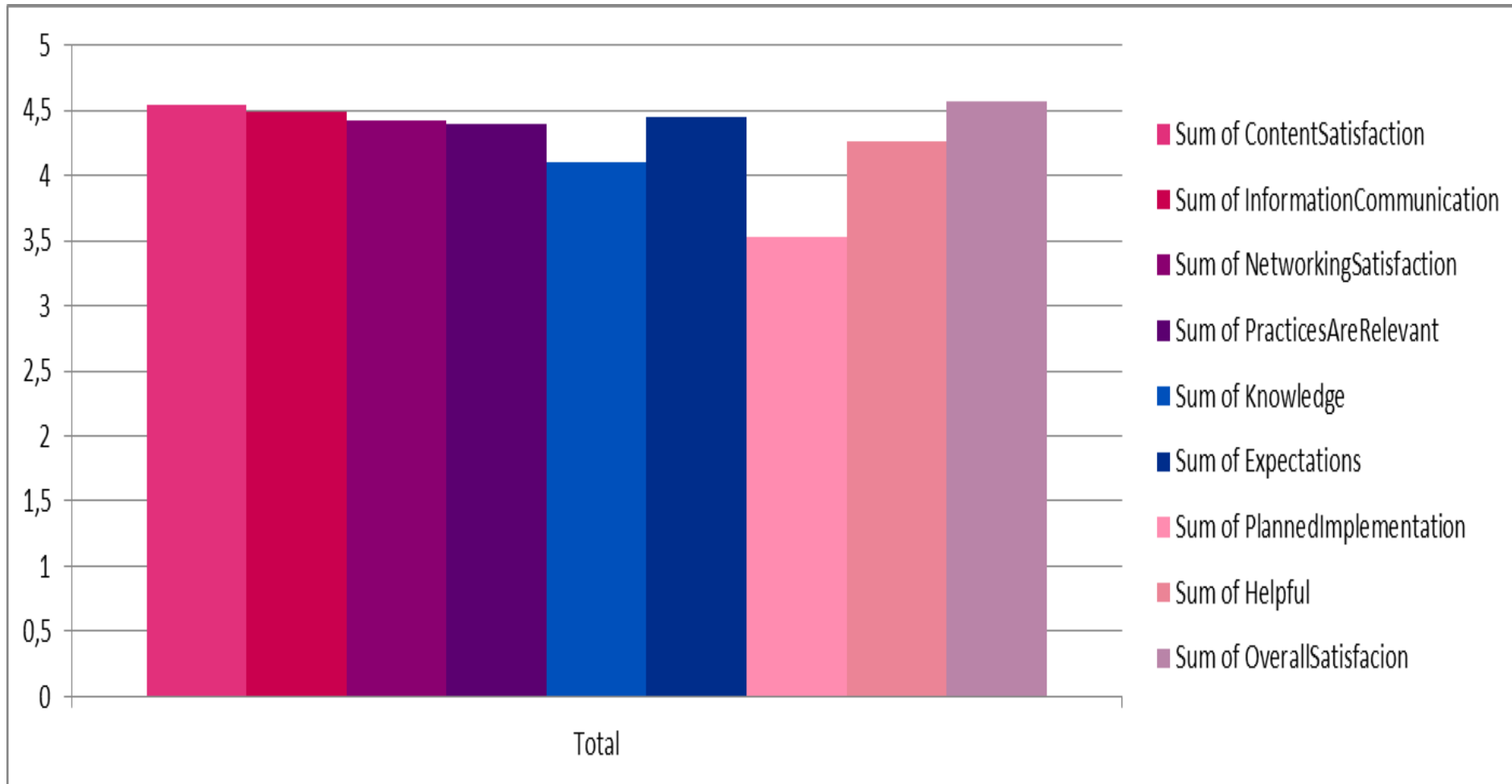
- build relationship between experts and practitioners and decision makers to promote the implementation of good practices in different settings

2 - About 200 EU HCOs have implemented and have assessed transferability of selected clinical good practices.

3 - About 500 good practices are available in the PaSQ database with relevant contact details.

4 – A network of 700 national stakeholders have been developed

Evaluation of EM



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Needs expressed by stakeholders for further PS and QC cooperation

- Higher involvement of clinicians (from hospital and other healthcare facilities)
- Increased involvement of PS&QC experts, risk manager from hospitals or frontline health care workers.
- agenda pushed closer to healthcare provider and patient organization.

Council Conclusions on PS

- WELCOMES the work of the European Network for Patient Safety and Quality of Care (Joint Action PaSQ) on the implementation of the Council Recommendation 2009/C150/01 **as regards the** exchange and implementation of good practices in Member States;
- RECOGNISES a need for **continued and** sustainable collaboration **at EU level** on patient safety and quality of care;
- **Develop further work on the dimensions of quality in healthcare, taking into account existing knowledge, including the work of the "Joint Action on patient safety and quality of care" (PaSQ);**
- **Finalise by December 2016 a framework for a sustainable EU collaboration on patient safety and quality of care, also taking into account the results of the "Joint Action on patient safety and quality of care" (PaSQ);**

A Sustainable network for Patient Safety and Quality of Care

- 1 - PaSQ network has demonstrated that knowledge exchange and mutual learning is a credible alternative to European standardization. Furthermore, this approach contributes to the provision of safe and high quality care in accordance with point 2 & 7 of Art 168 of the treaty
- 2 - The sustainable collaboration should further develop this approach, by increasing knowledge transfer via existing PaSQ web tools (database and exchange mechanism) and proposing further implementation tools to support MS in.
 - patient involvement/empowerment
 - reporting and learning / rapid alert systems
 - quality improvement systems European Peer review system
 - implementation of good clinical practices

DG HEALTH propositions

- 2014 work program would fund a feasibility study :
 - Mapping of existing standards in HC (at national and international level),
 - Define an EU framework to develop HC standards at EU level:
 - Rejected by 10 MSs and withdrawn by the EC
 - Conducted by CEN without EC mandate and funding.
- 2015 ending of the PaSQ joint action
 - New coordinating structure based on expert groups
 - Replacing PSQCWG and JA PaSQ
 - Involving all stakeholders including industry

Thank you for
your attention