

Implementation of Safe Clinical Practices in EU Member States (PaSQ Work Package 5)

based on the presentation
Mehrmann L, Aksoy T, Thomeczek C.
Patient Safety Initiatives Implementation (WP5):
Presentation of Main Outcomes.
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European Hospital and Healthcare Federation (HOPE)

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About HOPE

- ☐ European Hospital and Healthcare Federation, created in 1966
- □ 37 members in the 28 EU Member States + Switzerland and Serbia National public and private hospital associations and hospital owners, either federations of local and regional authorities or national health services
- ☐ Covering around 80% of hospital activity in the EU but also other health and social institutions



Mission:

promote improvements in the health of citizens throughout Europe, high standard of hospital care and foster efficiency with humanity in the organisation and operation of hospital and healthcare services.









Work Package 5 (WP5) – Patient Safety Initiatives Implementation

Leader: German Agency for Quality in Medicine (AQuMed)



Content

- Implementation of selected Safe Clinical Practices (SCPs) in Healthcare Organisations (HCOs) in European countries
- Compilation of one tool box per SCP
- Monitoring and assessment of implementation process

Results

- Report on implementation experiences
- Tested tool boxes were they helpful?









Agenda

- 1. Safe Clinical Practices for WP5 implementation
- 2. Overview of participating PaSQ Member States
- 3. Support tools for the implementation process
- 4. Monitoring and assessment
- 5. Results (implementation progress, tool boxes)
- 6. Conclusion and final remarks









Safe Clinical Practices for WP5 implementation

Clinical practices to enhance patient safety which are implemented

- for which a baseline measurement has been established <u>before</u> implementation,
- for which a measurement has been established <u>after</u> implementation,
- which have shown an improvement in patient safety as per the before and after measurement.

OR

- which have been evaluated using an intervention and a control group,
- for which an improvement in patient safety has been demonstrated when comparing these two groups.



Demonstrated effectiveness in clinical trials



European Union Network for Patient Safety and Quality of Care

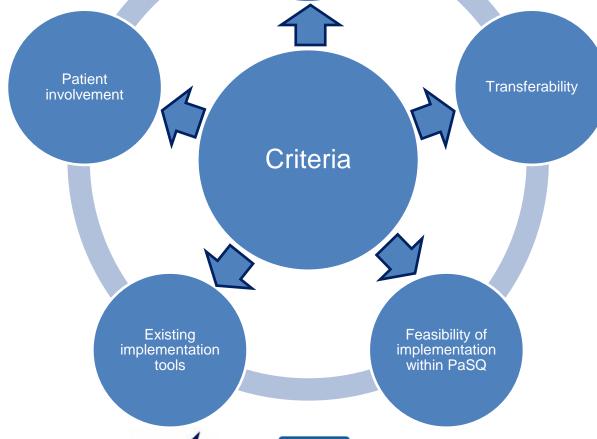






Safe Clinical Practices for WP5 implementation

Demonstrated effectiveness in clinical trials







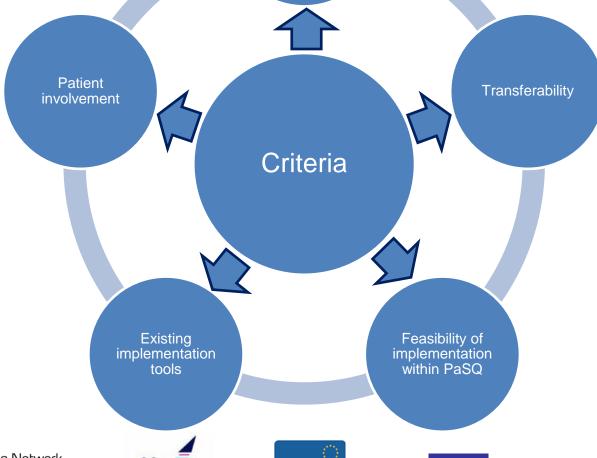




Safe Clinical Practices for WP5 implementation

Demonstrated effectiveness in clinical trials

- WHO Surgical Safety Checklist (SSC)
- Medication Reconciliation (MedRec)
- Multimodal intervention to increase hand hygiene compliance (HH)
- Paediatric Early Warning Scores (PEWS)











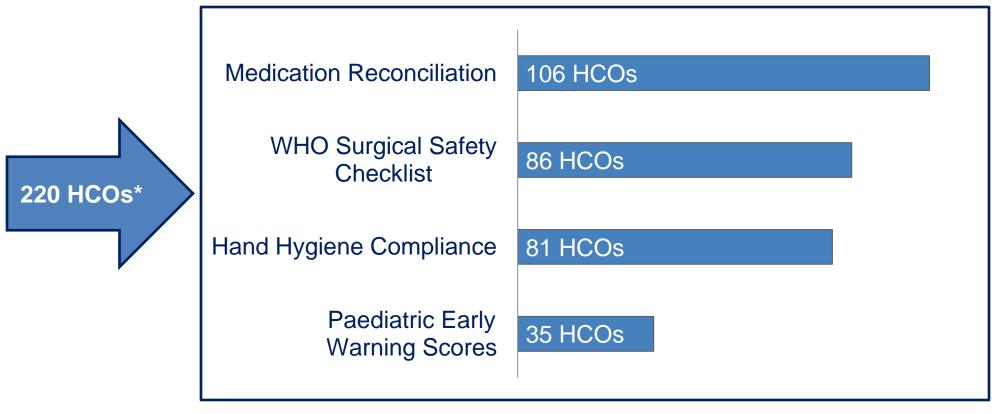
Participation in WP5 implementation

18 PaSQ Member States



Country	WHO Surgical Safety Checklist	Medication Reconciliation	Multimodal intervention to increase hand hygiene compliance	Paediatric Early Warning Scores
Austria	Х	Х		
Bulgaria	X	Х	Х	
Croatia	X	X		
Finland		Х	Х	
> France	X			
Germany		Х		
Greece	X			
Hungary	X	Х	Х	
> Ireland		X	Х	Х
italy	X	Х	Х	
Latvia	X		Х	
Lithuania	Х	Х	Х	
Netherlands		Х	Х	X
Norway	X			
Poland	Х		Х	
→ Spain	Х	Х	Х	Х
⇒ Slovakia	Х		Х	
United Kingdom				Х
Sum	13	11	11	4

Participation in WP5 implementation



* Several HCOs applied more than one SCP









Support tools for the implementation process

Implementation tool box for each SCP

http://www.pasq.eu/Wiki/SCP/WorkPackage5ToolBoxes.aspx

Innovator of the SCP and country of origin Safe Clinical Practices for Implementation (WP5 Work Package 5 Too Short description of the SCP and information on implementation Implementation of S Stepwise approach to implementation Practices Information on needed resources In order to guide Health Care Organisation Name of the tool Type of tool Summary of evidence for implementation process of the Safe Clinic Tool for evaluation and each SCP have been developed. They incl feedback ACADEMIA and additionally they offer a selection of sp References Tool for reminding staff in the workplace quidelines which can be used and/or adai used by the HCOs on a voluntary basis wh Medications at Transitions and Clinical Specific Tools Tool for promotion of a safety Handoffs (MATCH) Toolkit for Medication culture Reconciliation Tool Box for WHO Surgical Safety Checklist Tool for promotion of a safety Poster to prompt patients to bring their list of medications with them to Wexford Tool Box for Medication Reconciliation Tool for information of patients General Hospital and outpatient clinics and relatives Tool Box for Multimodal intervention to increase hand hygiene con START (screening tool to alert doctors to Tool for reminding staff in the the right treatment) workplace Tool Box for Paediatric Early Warning Scores (PEWS) STOPP (Screening Tool of Older Persons' Tool for reminding staff in the Prescriptions) workplace

Support tools for the implementation process

Webinars were organised for each SCP MedRec WHO SSC PEWS Hand Hygiene

- Aim: Foster the exchange of knowledge and experience
- Main target audience: The coordinators in the HCOs or other people from the HCOs taking part in the WP5 implementation process



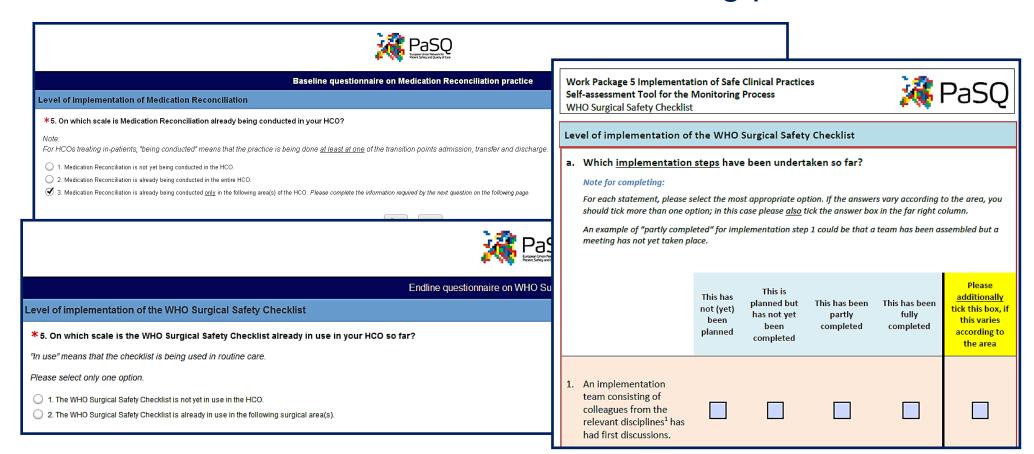






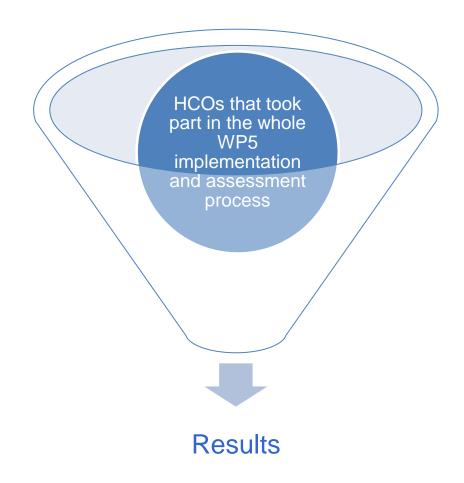
Monitoring and assessment

- Baseline questioning (BQ): September 2013
- Endline questioning (EQ): September 2014
- Self-assessment tools for the monitoring process



Results

- Medication Reconciliation:95 out of 106 HCOs (90%)
- WHO Surgical Safety Checklist:
 - 62 out of 86 HCOs (72%)
- Hand Hygiene:48 out of 81 HCOs (59%)
- PEWS:15 out of 35 HCOs (43%)











Results



What was the implementation progress made within the main WP5 implementation phase (Sept. 2013 - Sept. 2014)?

Have the SCPs been implemented as proposed in the tool boxes; means that the information and tools proposed have been used?

HCOs that took part in the whole WP5 implementation and assessment process

Results



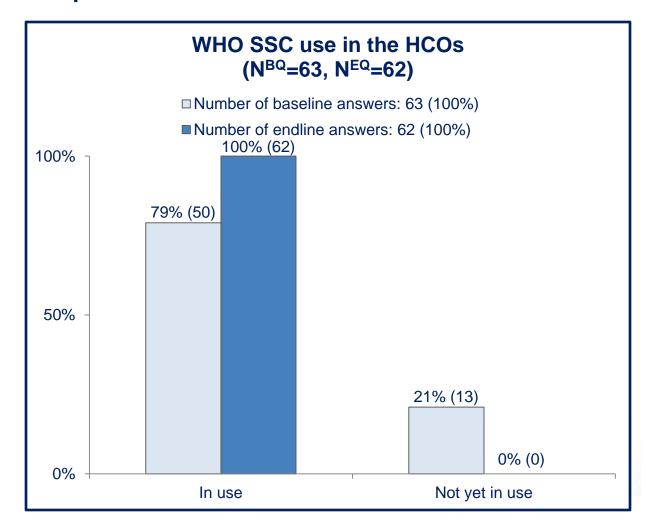






Results implementation progress (SSC)

WP5 implementation was used to deepen the implementation







Results implementation progress (SSC)

Process steps derived from WP5 tool box

"fully implemented" was the best selected answer option in BQ and EQ

> BQ: 56% - 70%

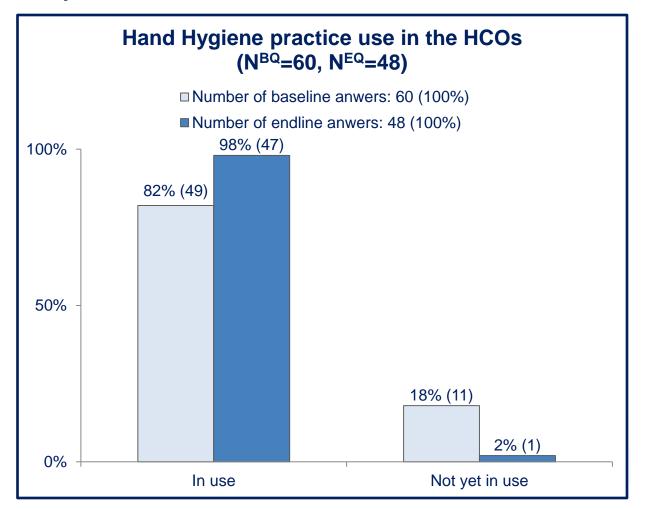
> EQ: 79% - 94%

		Not at all implemented	Partly implemented	Fully implemented
1.	The process steps related to the phase "Before induction of anaesthesia" have been implemented (meaning that items from this phase are being verified and completed in the checklist).			
2.	The process steps related to the phase "Before skin incision" have been implemented (meaning that items from this phase are being verified and completed in the checklist).			
3.	The process steps related to the phase "Before patient leaves operating room" have been implemented (meaning that items from this phase are being verified and completed in the checklist).			
4.	(A) designated checklist coordinator(s) lead(s) the checklist process to confirm the completion of each step.			0



Results implementation progress (HH)

WP5 implementation was used to deepen the implementation







Results implementation progress (HH)

Components of the practice from WP5 tool box

"partly implemented" / "fully implemented" were the most selected answer options in BQ and EQ

> BQ: 47% - 92%

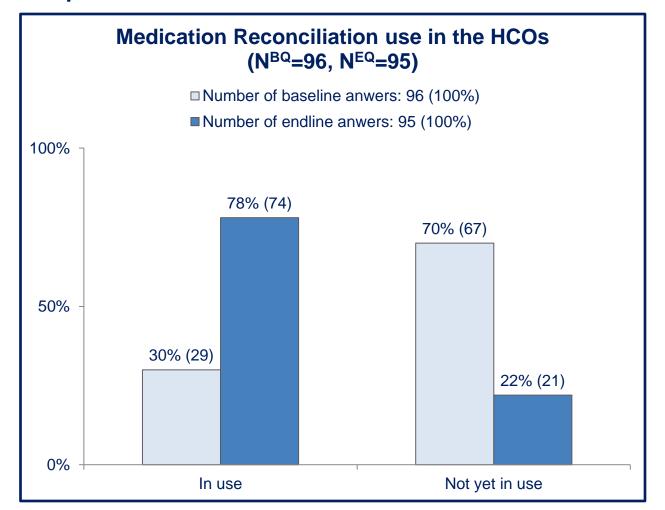
> EQ: 50% - 94%

			<u> </u>	
		Not at all implemented	Partly implemented	Fully implemented
1.	System change: The necessary infrastructure has been implemented for allowing health care workers to practice hand hygiene (i.e., access to a safe, continuous water supply as well as to soap and towels AND readily-accessible alcohol-based hand rub at the point of care).			
2.	Training/education: Training on the correct procedures, based on the "five moments for hand hygiene" approach, has been provided to the health care workers (e.g. via slide presentations and practical demonstrations of how and when to perform hand hygiene).			
3.	Evaluation and feedback: An evaluation methodology including the provision of performance and results feedback to the staff has been developed.			



Results implementation progress (MedRec)

WP5 implementation was used to start with the implementation







Results implementation progress (MedRec)

Process steps derived from WP5 tool box

- BQ: "not at all implemented" (63% 72%)
- EQ: "fully implemented", at least for a pilot test (52% - 60%)

				→
		Not at all implemented	Partly implemented	Fully implemented
1.	The process steps related to the phase "Create a complete and accurate Best Possible Medication History (BPMH)" have been implemented.			
2.	The process steps related to the phase "Reconcile medications" have been implemented.			
3.	The process steps related to the phase "Document and communicate any resulting changes in medication orders" have been implemented.			



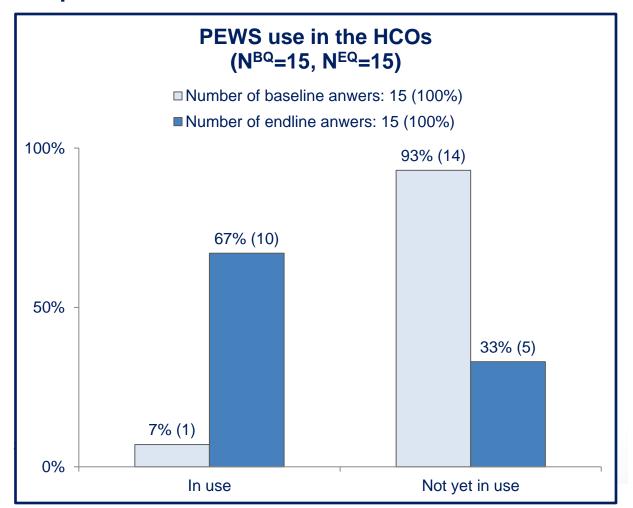






Results implementation progress (PEWS)

WP5 implementation was used to start with the implementation







Results implementation progress (PEWS)

Process steps derived from WP5 tool box

- BQ: "not at all implemented" (87%)
- EQ: "fully implemented", at least for a pilot test (40% - 47%)

		I —		\longrightarrow
Г		Not at all implemented	Partly implemented	Fully implemented
1.	The process steps related to recording the relevant observations in the PEWS charts have been implemented.			
2.	Procedures for acting on the scores generated from the observations have been implemented (e.g. consult responsible physician when a certain score is calculated).			



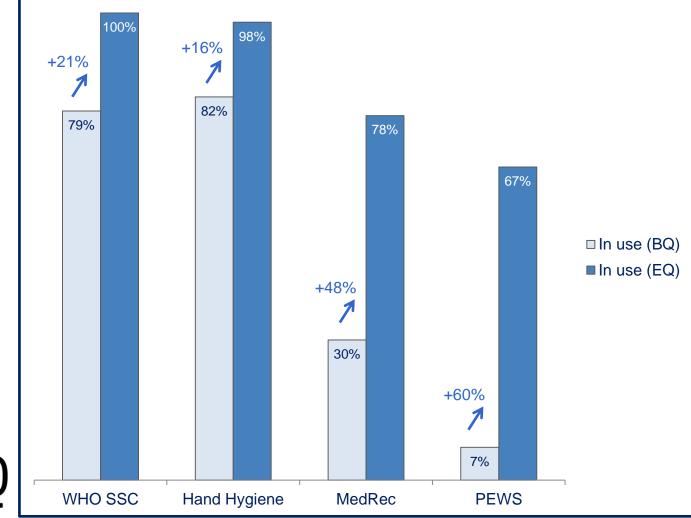






Results implementation progress

At a glance





Results

What was the implementation progress made within the main WP5 implementation phase (Sept. 2013 - Sept. 2014)?

Have the SCPs been implemented as proposed in the tool boxes; means that the information and tools proposed have been used?

HCOs that took part in the whole WP5 implementation and assessment process Results

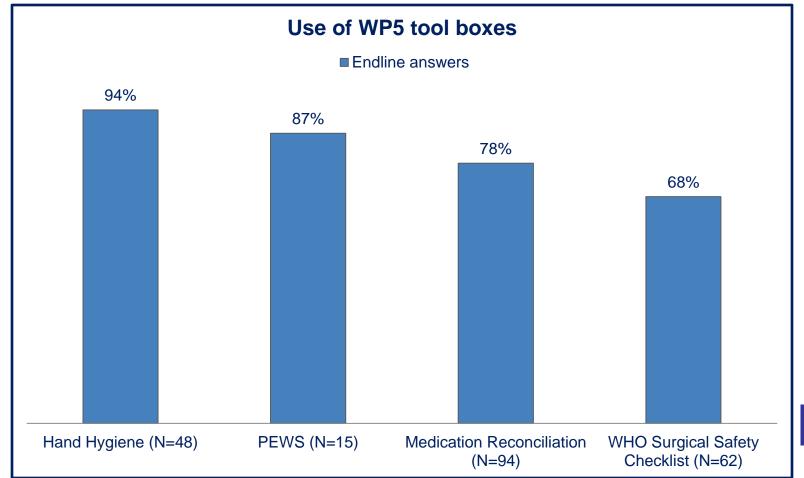






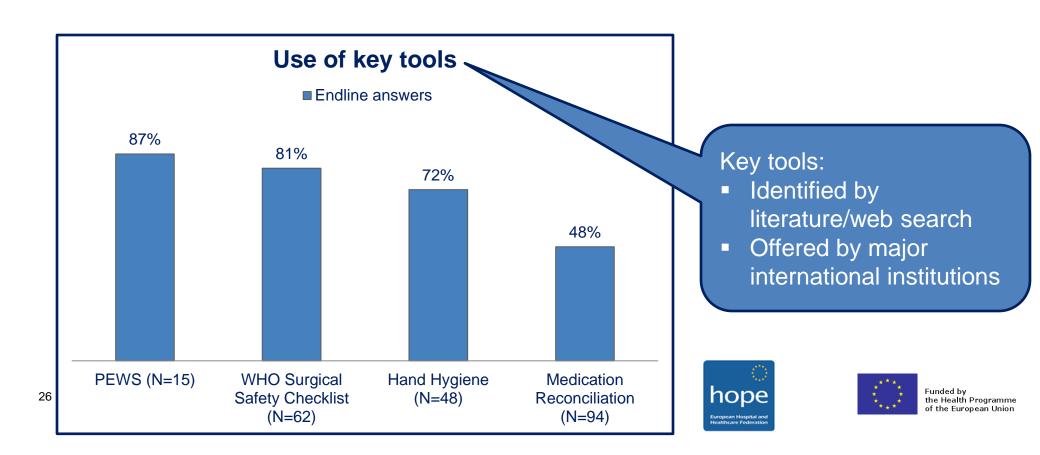


The WP5 tool boxes were used by between 68% (SSC) and 94% (Hand Hygiene) of the HCO coordinators

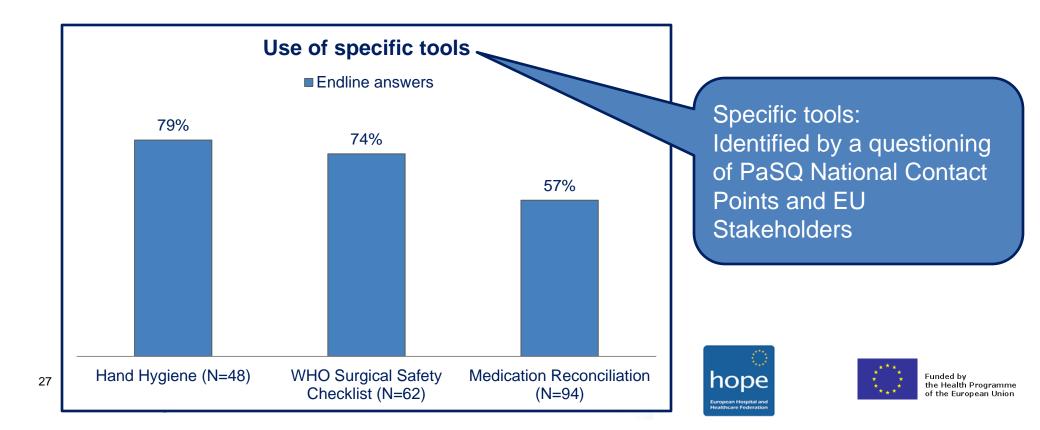




The key tools were used by between 48% (MedRec) and 87% (PEWS) of the HCO coordinators.



The specific tools were used by between 57% (MedRec) and 79% (Hand Hygiene) of the HCO coordinators.



The most used information from the WP5 tool boxes varied according to the SCP









The most used information from the WP5 tool boxes varied according to the SCP

Hand Hygiene (N=48)

Innovator of the SCP and country of origin

87%

Short description of the SCP and information on implementation

Stepwise approach to implementation

Information on needed resources

Summary of evidence for effectiveness

References









The most used information from the WP5 tool boxes varied according to the SCP

Paediatric Early Warning Scores (N=15)

Innovator of the SCP and country of origin

Short description of the SCP and information on implementation

Stepwise approach to implementation

Information on needed resources

Summary of evidence for effectiveness

European Union Network for Patient Safety and

References









47%

each

The most used information from the WP5 tool boxes varied according to the SCP

Medication Reconciliation (N=94)

Innovator of the SCP and country of origin

Short description of the SCP and information on implementation

Stepwise approach to implementation

Information on needed resources

Summary of evidence for effectiveness



References







46%

The most used information from the WP5 tool boxes varied according to the SCP

> WHO Surgical Safety Checklist (N=62)

Innovator of the SCP and country of origin

Short description of the SCP and information on implementation

Stepwise approach to implementation

Information on needed resources

Summary of evidence for effectiveness

References









37%

Conclusion and final remarks

Limitations

- PaSQ is not a scientific project but a networking one → the baseline and endline questionnaires have not been scientifically validated
- Results from the baseline and endline questioning are based on the information provided by the HCO coordinators and on their subjective assessments
- Language barrier: Could lead to a misunderstanding of some of the questions as all questions and answer options were provided in English
- In general: The question whether the implementation achievements are related to PaSQ WP5 or to other (national) initiatives, campaigns or programmes cannot be answered









Conclusion and final remarks

Recap

- 220 HCOs including hospitals, ambulatory primary healthcare centers, secondary healthcare centers and nursing homes from 18 European countries took part in WP5 implementation
- Several support means for the SCP implementation were provided (tool boxes, self-assessment tools, webinars)
- The results of the baseline and endline questioning showed overall a positive one year development concerning the implementation









Special thanks to ...

- all Spanish Healthcare Organisations that put their effort and time in taking part in the WP5 implementation process
- ... to the Spanish PaSQ National Contact Point for supporting the Spanish HCOs during the PaSQ implementation phase

Thank you for your attention!

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