

Flow of the Patient Safety Report Process

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Report On Patient Safety

Patrick Waterson



Report On Patient Safety:

The third report from the Patient Safety Observatory National Patient Safety Agency, 2007 *Global patient safety report 2024* World Health Organization, 2024-05-30 The first ever WHO Report on Patient Safety the Global Patient Safety Report 2024 offers a comprehensive overview of patient safety implementation worldwide Aligned with the Global Patient Safety Action Plan 2021 2030 this report explores policies strategies and initiatives shaping safety in health care From analyses of country actions to in depth summaries of burden of unsafe care it provides crucial insights for policy makers health care leaders researchers and patient safety advocates Explore how nations address challenges learn from case studies and feature stories and gain deeper understanding in priority areas for action This report serves as a vital resource for fostering global collaboration and advancing patient safety in health care The contents of this report encompass An analysis that compiles and describes actions taken by countries including the summary of these actions across different WHO regions and income levels based on Member State survey An in depth summary presenting evidence on the overall burden of unsafe health care practices viewed broadly as well as within specific population groups clinical domains and according to major sources of harm Case studies showcasing how different countries are learning and developing patient safety solutions within their unique contexts along with feature stories highlighting key global initiatives and interventions in patient safety Comparative analyses offering deeper insights into crucial areas such as patient safety policies legal frameworks patient involvement educational initiatives reporting and learning systems and the involvement of various stakeholders **Patient safety incident reporting and learning systems** , 2020-08-31 Patient safety incident reporting and learning systems aim to capture patient safety incidents and provide structured learning since this can be key to improving patient safety and preventing the occurrence of harm This document presents the purpose and strengths of patient safety incident reporting and provides some practical guidance on establishing patient safety incident reporting and learning systems *Safety in Doses* , 2007 **House Reports** , **Patient Safety: Research Into Practice** Walshe, Kieran, Boaden, Ruth, 2005-11-01 Presents a research based perspective on patient safety drawing together the most recent ideas on how to understand patient safety issues along with how research findings are used to shape policy and practice **VA Patient Safety Program a cultural perspective at four medical facilities : report to the Secretary of Veterans Affairs.** , Patient Safety Culture Patrick Waterson, 2018-10-09 How safe are hospitals Why do some hospitals have higher rates of accident and errors involving patients How can we accurately measure and assess staff attitudes towards safety How can hospitals and other healthcare environments improve their safety culture and minimize harm to patients These and other questions have been the focus of research within the area of Patient Safety Culture PSC in the last decade More and more hospitals and healthcare managers are trying to understand the nature of the culture within their organisations and implement strategies for improving patient safety The main purpose of this book is to provide researchers healthcare managers and human factors

practitioners with details of the latest developments within the theory and application of PSC within healthcare. It brings together contributions from the most prominent researchers and practitioners in the field of PSC and covers the background to work on safety culture e.g. measuring safety culture in industries such as aviation and the nuclear industry, the dominant theories and concepts within PSC, examples of PSC tools, methods of assessment and their application, and details of the most prominent challenges for the future in the area. **Patient Safety Culture: Theory, Methods and Application** is essential reading for all of the professional groups involved in patient safety and healthcare quality improvement, filling an important gap in the current market.

Patient Safety, Law, Policy and Practice John Tingle, Pippa Bark, 2011-03-02. The chapters in this book explore the patient safety managerial structures that exist in countries where there are developed patient safety infrastructures and cultures. The legal structures of these countries are explored and related to major in-country patient safety issues in order to draw comparisons and conclusions on patient safety.

Hospital-Based Views and Practices Related to Incident Reporting and Patient Safety Tanya Hewitt, 2015. Patient safety has been on the research agenda since 2000 when unnecessary harm to patients in providers' care came to light. In 2005, the improvements in patient safety fell short of expectations, and the patient safety research community recognized that the issues are more difficult to resolve than first thought. One of the tools to address this vexing problem has been voluntary incident reporting systems, although the literature has given incident reporting systems mixed reviews. This qualitative comparative case study comprises 85 semi-structured interviews in two separate divisions of a tertiary care hospital: General Internal Medicine (GIM) and Obstetrics and Neonatology (OBS/NEO). The main line of questioning concerned incident reporting; general views of patient safety were also sought. This is a thesis by publication. The thesis consists of a general introduction to patient safety, a literature review, a description of the methods and cases followed by the manuscripts. The thesis concludes with a summarization of the findings and implications of the study.

Manuscript one focuses on the reporter end of incident reporting systems. It asks what frames underlie GIM nurse and physician self-reporting and peer-reporting practices. The findings showed that frames that inhibit reporting are shared by physicians and nurses, such as the fear of blame frame regarding self-reporting and the tattletale frame regarding peer-reporting. These frames are underpinned by a focus on the individual despite the organisational message of reporting for learning. A learning frame is an enabler to incident reporting. Viewing the objective of voluntary incident reporting as learning allows practitioners to depersonalize incident reporting. The focus becomes preventing recurrence and not the individual reporting or reported on.

Manuscript two again focuses on the reporter end and on one type of reportable incident: a problem that healthcare practitioners can fix themselves. The study asks when faced with such a problem, do practitioners fix it in the moment and forget about it, or do they fix it in the moment and report it? We found that 'fixing and forgetting' was the main choice that most GIM practitioners made in situations where they faced problems that they themselves could resolve. These situations included a handling near misses which were seen as unworthy of reporting.

since they did not result in actual harm to the patient b prioritizing solving individual patients safety problems which were viewed as unique or one time events and c encountering re occurring safety problems which were framed as inevitable routine events The paper argues that fixing and forgetting patient safety problems encountered may not serve patient safety as well as fixing and reporting The latter approach aligns with a preventive view of patient safety Manuscript three focuses on the practice of double checking drawing from interviews conducted in both GIM and OBS NEO It asks what weaknesses are in the double checking process and what alternative views can help the double checking process enhance patient safety The findings showed weaknesses in the double checking process such as a double checking trusted as an independent process b double or more checking as a costly and time consuming procedure and c double checking as preventing reporting of near misses It is proposed that there are alternative ways of viewing and practising double checking in order to enhance patient safety These include a recognizing that double checking requires training b introducing automated double checking and c expanding double checking beyond error detection The paper argues that practitioners need to be more aware of the caveats of double checking and to view the double checking process through alternate lenses to help enhance its effectiveness Manuscript four focuses on the reporting system more comprehensively and attends to the reporting process in GIM and OBS NEO This is a comparative case study of the two divisions and considers the different stages in the process and the factors that help shape the process The findings showed that there were major differences between the two divisions in terms of a what comprised a typical report outcome based vs communication and near miss based b how the reports were investigated individual manager vs interdisciplinary team c learning from reporting interventions having ambiguous linkages to the reporting system vs interventions having clear linkages to reported incidents and d feedback limited feedback vs multiple feedback The differences between the two divisions can be explained in terms of a the influence of litigation on practice b the availability or lack of interprofessional training and c the introduction of the reporting system top down vs bottom up approach A model based on the findings portraying the influences on incident reporting and learning is provided This thesis contributes to an in depth understanding of front line perspectives on incident reporting systems and safety and aims to provide insights into improving patient safety Implications for practice and research will be addressed

World patient safety day goals 2021-2022 ,2021-09-17 World Patient Safety Day is observed on 17 September each year with the objectives of increasing public awareness and engagement enhancing global understanding and spurring global solidarity and action to promote patient safety Each year a campaign is launched on a selected patient safety related theme The overall goal of World Patient Safety Day is to improve globally patient safety at the point of care To support this endeavour World Patient Safety Day goals are released every year The goals aim to achieve tangible and measurable improvements at the point of health service delivery Each goal is accompanied by suggested actions based on existing WHO guidance which could facilitate improvement in the focused safety practice domain Links to available WHO resources on the subject are provided

with each goal The World Patient Safety Day goals 2021 2022 are aimed at making maternal and newborn care safer Target audiences are health care facilities and health service providers point of care health workers patient groups professional associations policy makers health administrators

Clinical Engineering Handbook Joseph F. Dyro, 2004-08-27 As the biomedical engineering field expands throughout the world clinical engineers play an ever more important role as the translator between the worlds of the medical engineering and business professionals They influence procedure and policy at research facilities universities and private and government agencies including the Food and Drug Administration and the World Health Organization Clinical engineers were key players in calming the hysteria over electrical safety in the 1970s and Y2K at the turn of the century and continue to work for medical safety This title brings together all the important aspects of Clinical Engineering It provides the reader with prospects for the future of clinical engineering as well as guidelines and standards for best practice around the world

Patient Safety in Emergency Medicine Pat Croskerry, Karen S. Cosby, 2009 With the increased emphasis on reducing medical errors in an emergency setting this book will focus on patient safety within the emergency department where preventable medical errors often occur The book will provide both an overview of patient safety within health care the culture of safety importance of teamwork organizational change and specific guidelines on issues such as medication safety procedural complications and clinician fatigue to ensure quality care in the ED Special sections discuss ED design medication safety and awareness of the culture of safety

Vignettes in Patient Safety Michael S. Firstenberg, Stanislaw P. Stawicki, 2017-09-13 It is clearly recognized that medical errors represent a significant source of preventable healthcare related morbidity and mortality Furthermore evidence shows that such complications are often the result of a series of smaller errors missed opportunities poor communication breakdowns in established guidelines or protocols or system based deficiencies While such events often start with the misadventures of an individual it is how such events are managed that can determine outcomes and hopefully prevent future adverse events The goal of Vignettes in Patient Safety is to illustrate and discuss in a clinically relevant format examples in which evidence based approaches to patient care using established methodologies to develop highly functional multidisciplinary teams can help foster an institutional culture of patient safety and high quality care delivery

United States Congressional Serial Set, Serial No. 14985, House Reports Nos. 175-202, Plumer's Principles and Practice of Infusion Therapy Sharon M. Weinstein, Mary E. Hagle, 2014-04-02 The Ninth Edition of Plumer's Principles and Practice of Infusion Therapy provides clear concise coverage of basic and advanced infusion procedures Rely on this new edition for the most current coverage of intravenous therapy function procedures standards and equipment along with practical new features and emphasis on safety considerations as well as evidence based practice The book begins with an overview of IV therapy including how to minimize risk and enhance performance and then addresses assessment and monitoring clinical decision making patient specific therapies and infusion therapy for children the elderly and across the continuum of care

Communication Skills Kay

Norman,2019-09-25 Communication Skills is an accessible textbook for nursing and healthcare students seeking to understand the concept of communication and to develop their communication skills Through clear explanations case studies and activities the book will help you to understand the principles of communication and develop your own skills for your healthcare practice You will learn Why communication is fundamental to nursing and health care How to communicate in assessing planning providing and managing care How to communicate in promoting health and in therapeutic interventions How to communicate in difficult situations How to communicate with a diverse range of people How communication is used to improve patient safety This book will help you to demonstrate your communication skills and develop your proficiency in nursing and health care Essentials is a series of accessible introductory textbooks for students in nursing health and social care New and forthcoming titles in the series The Care Process Communication Skills Leadership Mental Health Promoting Health and Wellbeing Study Skills

Cross-Cultural Design Pei-Luen Patrick Rau,2016-07-04 This book constitutes the proceedings of the 8th International Conference on Cross Cultural Design CCD 2016 held as part of the 18th International Conference on Human Computer Interaction HCII 2016 held in Toronto ON Canada in July 2016 and received a total of 4354 submissions of which 1287 papers and 186 poster papers were accepted for publication after a careful reviewing process These papers address the latest research and development efforts and highlight the human aspects of design and use of computing systems The papers thoroughly cover the entire field of Human Computer Interaction addressing major advances in knowledge and effective use of computers in a variety of application areas The 81 papers presented in the CCD 2016 proceedings are organized in topical sections as follows culture and user experience cross cultural product and service design cultural ergonomics culture and mobile interaction culture in smart environments cross cultural design for health well being and inclusion and culture for e commerce and business

The National Patient Safety Agency Annual Report and Accounts 2004-2005 National Patient Safety Agency,2005-07-19 With correction slip dated July 2005

Health Care Professionalism at a Glance Jill Thistlethwaite,Judy McKimm,2015-08-03 Health Care Professionalism at a Glance offers accessible coverage of an increasingly important aspect of medical and health professional education This concise text includes how to identify and develop professional behaviours how they are assessed and how to challenge unprofessional behaviours Health Care Professionalism at a Glance Provides a user friendly and thought provoking overview of health care professionalism Introduces the main topics key definitions and explores aspects relevant to learners and novice professionals Considers fundamental features of professionalism that students are expected to acquire as well as how they are taught learned and assessed Includes summary boxes that highlight important points reflection points clinical cases and suggested further reading Includes references relevant to different countries accrediting bodies This important new book will assist students in understanding the nature of professionalism its assessment and the implications for professional practice

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