



Ministerie van Volksgezondheid,
Welzijn en Sport



PSQCWG

the Dutch Patient Safety Strategy

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Presentation

- Facts and figures
- History
- Safety program in hospitals:
'prevent harm, work safely'
- Responsibility and involvement different parties
- Patient safety programs other sectors



Facts and figures Dutch hospitals

- 88 non academic hospitals
- 8 academic hospitals
- 38.792 hospital beds
- 180.000 employees
- 1.500.875 admissions



2003: Better Faster

2006: HARM study (hospital admissions related to medication)

2007: study on avoidable harm in Dutch hospitals (EMGO/Nivel)



History

2003 Better Faster, Rein Willems, Shell

Recommendations:

- Every hospital should have a certified Safety Management System by 2008
- Hospital boards are responsible for safety
- Health care insurers should select safe care in hospitals
- The government should take responsibility to get this process going





History

November 2006: Publication HARM study

- 5.6% of all hospital admissions are due to a medication problem/fault. Half of them are preventable
- 19.000 preventable admissions per year due to medication faults
- 6.6% of all HARM's dies (1250 patients a year)

April 2007. EMGO/Nivel study. Unintended harm in Dutch hospitals patient record reviews and event reports

- 5.7% of all admitted patients are involved with unintended harm
- In 2.3% of all admissions there is preventable harm
- Every year there is a relation between the death of 1735 patients and preventable unintended events



2008: Unique approach patient safety program hospitals 'Prevent injury, work safely'

- 50% reduction of avoidable unintended harm in Dutch hospitals (2008-2012)
- Program of the hospital organizations, doctors and nurses

Combination of obligation and freedom to choose:

- Focus on implementing the patient safety management system in all hospitals before 2012
- Focus on ten themes with their interventions



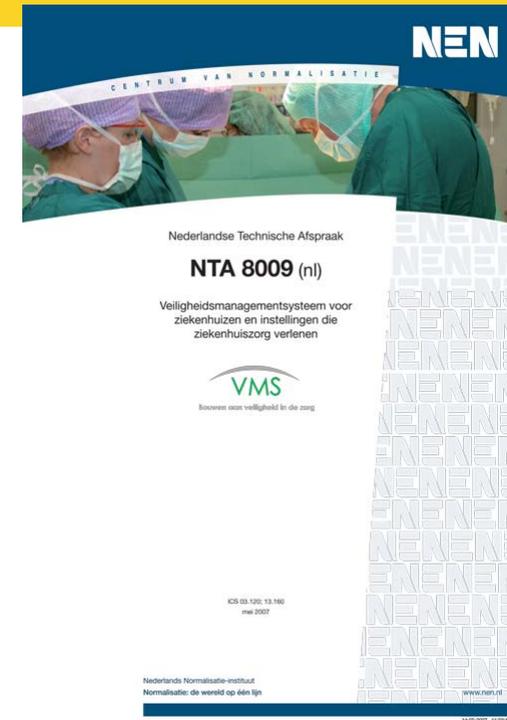


Safety Management System

Basic elements:

- Policy & strategy
- Proactive culture
- Prospective risk inventory
- Incident reporting & analyses
- Continuing improvement

Laid down in a Dutch Technical Agreement (NTA: 8009)





Ten themes & interventions

Prevent surgical site infection

Prevention of injury in patients with sepsis incl. central venous line

Early recognition of patients with threatened vital functions

Prevention of medication errors, mainly attention on transfer times

Prevention of accidental avoidable harm to elderly patients, with specific attention on: a. Recognising and preventing confusion (delirium); b. falls; c. loss of mobility; d. malnutrition

Prevention of death through a sudden unexpected heart attack (acute myocardial infarction)

Prevention of unnecessary patient suffering as a result of pain

Prevention of incidents associated with the preparation and administration of high-risk medication

Prevention of mix-ups in and among patients

Prevention of renal insufficiency (inadequate kidney function) through the use of contrast agents and medication



Support and material from the program

- Information material on SMS and ten themes & interventions
- Conferences on themes
- Training of professionals & masterclasses
- Yearly national patient safety conference
- Theatre play developed for hospitals





Responsibility and involvement different parties

- Financed by and under administrative responsibility of the Ministry of Health, Welfare and Sport
- Development and implementation by hospital care organizations and hospitals.
- Monitor and supervision by the Health Care Inspectorate
- 2012 Achievement of the aims



Measuring/first results

- 93 hospitals participate
- COMPaZ culture questionnaire
- Yearly test of SMS- implementation and scores on performance indicators by the Inspectorate
- Repetition of patient record review-study in 2010 (records 2008) and 2013 (records 2011 and 2012)



Other sectors: Primary Care, mental healthcare, longterm care

Primary Care

- October 2009: agreements with the 20 organizations involved.
- Safety program with focus on safety management system and specific themes.
- Record reviews: less avoidable injury

Share and exchange information on different programs!
And on different aspects of quality and their connection



Secure patient safety at health care providers

- Health care providers have to integrate safety in systems and culture
- Patient safety is no longer free of obligations and boards are responsible.
- ZonMw: programma 'Safety in Care'



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