

Developing An Agenda for Research in Patient Safety

Priority-Setting Process

1. Objective

To obtain an ordered menu of opportunities or objectives for research on patient safety

Note that this will be done globally at first, but we intend to also provide a product that can be used at the country level.



2. Proposed Framework:

Scope:

- All areas which relate to patient safety, both outside and inside the hospital
 - Included are errors of commission and also errors of omission
 - One definition of patient safety that brings attention is: “Freedom from accidental harm” of the “To err is human” report.
- The types of research to include: epidemiological, methodological, evaluation of interventions, economic, implementation, dissemination
- Desired outcome: a menu of research questions
- Expected life-cycle of the outcome: to be reviewed and updated every four years

Audience: funders of research, health ministers, commissioners and other policy makers, policy advisory institutions, research institutions, researchers, providers, general public.

Constituencies participating:

- Researchers, safety leaders, providers, and patients to develop a proposed agenda. Funders of research, policy makers, researchers, providers, patients to review and comment on the proposal both in intermediate term and the final work product.

Criteria to be used for ranking:

- Frequency of safety issue;
- Severity of issue (magnitude of harm);
- Distribution of harm (children, mothers; the elderly, the poor; developed versus developing countries/patients)
- Impact on the efficiency of the system (and costs associated with the problem)
- The existence of solutions, feasibility of developing or adopting solutions and sustainability of solutions
- The urgency or the political backing to target the problem

Method for ranking:

1. Using Rand Delphi approach
2. Identification of areas of agreement and disagreement

Knowledge is the enemy of unsafe care

3. The process for priority setting.

- a. **Scoping**: problem definition
- b. Building **constituencies**: identification of stakeholders
- c. Getting agreement. Agreement of the **method**, **calendar**, and **tasks**
- d. **Implementation**:
 - (i) Description of the ideal situation (the goal)
 - (ii) Situation analysis: the burden of the problem (magnitude, characteristics, distribution), why the burden persists, are there effective interventions; why are not effectively implemented; which are the available resources to tackle the problem):
 - literature review, aiming at description of knowledge gaps and knowledge-to-implementation gaps,
 - Resource analysis and constraint/feasibility analysis
 - (iii) Comparative advantage of the priority-setting institution
 - (iv) Application of priority setting criteria and weight assignment: the ranking (building up some sensitive analysis)
 - (v) Validity checks: face validity; external reviews (iterative process)
- e. **Communications**
- f. Medium term: **Impact evaluation** and review (indicators of impact to be identified during planning stages)