Worldwide, the delivery of health care is challenged by a wide range of safety problems. The traditional medical oath—“First do no harm”—is rarely violated intentionally by physicians, nurses, or other practitioners, but the fact remains that patients are harmed every day in every country across the globe in the course of receiving health care. The first things that we must do are to acknowledge this disturbing truth; to reject the notion that the status quo is acceptable; and, perhaps most important, to act to correct the problems that are contributing to unsafe care.

All patients have a right to effective, safe care at all times. Unintended harm to patients undergoing treatment is not a new phenomenon. The earliest record of this problem dates from the 17th century BC. The response in those days was clearly and solely punitive (for example, cutting off a surgeon’s hand). Today, the solutions for improving patient safety offer a more constructive approach—one in which success (safer care) is determined by how well caregivers work together as a team, how effectively they communicate with one another and with patients, and how carefully the care delivery processes and supporting systems of care are designed. With the growing recognition of safety problems in health care, it is now time to create and disseminate “Solutions” for patient safety.

Fortunately, political leaders in some countries are framing their arguments for reforming health care in terms of higher quality and the elimination or correction of practices that are known to be unsafe or wasteful. Similarly, patients and their families are becoming increasingly skilled in accessing information to make personal health care decisions about treatments and their choice of providers, and demanding safer care as well. Health-care practitioners are also becoming more proficient at incorporating evidence-based knowledge into their clinical decision-making practices.

In 2005, the World Health Organization (WHO) launched the World Alliance for Patient Safety and identified six action areas. One of these action areas is the development of “Solutions for Patient Safety”. In the same year, the Joint Commission and Joint Commission International were designated as a WHO Collaborating Centre for Patient Safety Solutions, to initiate and coordinate the work of developing and disseminating solutions for patient safety. The output from this component of the World Alliance will be delivered to the global health-care community as “Patient Safety Solutions”.

IDENTIFICATION, PRIORITIZATION AND DISSEMINATION OF SOLUTIONS:

Errors and adverse events can result from a variety of issues at different levels within health care—for example, at the level of government support (e.g. funding), the level of a health-care facility or system (e.g. structure or processes), or at the point of intervention between patients and practitioners (e.g. human error). The Solutions from this initiative will not address the broad underlying causes of patient safety problems (e.g. inadequate resources), but rather will be directed at the specific level where good process design can prevent (potential) human errors from actually reaching the patient. Solutions, therefore, will be intended to promote an environment and support systems that minimize the risk of harm despite the complexity and lack of standardization in modern health care.
Within the foregoing context, the term “Patient Safety Solution” is defined as:

Any system design or intervention that has demonstrated the ability to prevent or mitigate patient harm stemming from the processes of health care.

Solutions development for this action area of the World Alliance for Patient Safety involve extensive research to identify and prioritize the safety problems to be addressed and to review any existing solutions for those problems that might be adopted, adapted, or further developed for international dissemination. An International Steering Committee, a panel of international experts in patient safety, oversees the selection of topics and the development of a defined set of Solutions. The candidate Solutions are then prioritized based on potential impact, strength of evidence, and feasibility for adoption or adaptation in all countries, in the context of known cultural and economic differences. The highest-priority Solutions are reviewed by Regional Advisory Groups in different areas of the world and are then made available for an Internet-based field review, which permits comments and suggestions from any interested party. The International Steering Committee then finally approves the Solutions, which are then transmitted to the WHO for publication and dissemination.

► FORMAT FOR PATIENT SAFETY SOLUTIONS:

► Patient Safety Solution Title
► Statement of the Problem and Impact
► Background and Issues
► Suggested Actions
► Looking Forward
► Applicability
► Opportunities for Patient and Family Involvement
► Strength of the Evidence
► Potential Barriers to Implementation
► Risks for Unintended Consequences
► References
► Other Selected Resources

► INAUGURAL PATIENT SAFETY SOLUTIONS:

1. Look-Alike, Sound-Alike Medication Names
2. Patient Identification
3. Communication During Patient Hand-Overs
4. Performance of Correct Procedure at Correct Body Site
5. Control of Concentrated Electrolyte Solutions
6. Assuring Medication Accuracy at Transitions in Care
7. Avoiding Catheter and Tubing Mis-Connections
8. Single Use of Injection Devices
9. Improved Hand Hygiene to Prevent Health Care-Associated Infection

► NEXT STEPS:

The process for the identification, prioritization, and dissemination of Solutions, as described above, was developed because of the recognized complexity and challenges involved in implementing Solutions around the world. There are challenges also in the ability to effectively measure the impact and long-term effects of any Solution. To better delineate the issues related to the implementation of Solutions and the measurement of the impact and long-term results, a separate pilot programme is also under way. The results of that pilot programme will form the basis for the subsequent elaboration of strategies for the broad-ranging implementation of the Solutions.

Changes in health organization and professional cultures must eventually be part of the overall transformation that the World Alliance is seeking, but this will be a major challenge as it shifts values, beliefs, and behaviours at both the organization and professional leadership levels. Such changes are urgently needed to facilitate the frontline changes where the processes of care are actually applied. The Solutions provide insights and methods for managing patient safety at multiple levels, including, but not limited to, government and industry, health-care systems and facilities, and at the individual practitioner and patient level.

The cumulative information relating to the Solutions programme is being managed on a single secure database and being made accessible to the public on a stable web site housed at the Joint Commission International Center for Patient Safety. For further information and to provide suggestions for future Solutions please visit the web site (www.jcipatientsafety.org).
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