

CCHSA Patient Safety Strategy –Phase 2

Strengthening Capacity and Connecting the Dots 2007-2010



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**CCHSA Patient Safety Strategy – Phase 2
Strengthening Capacity and Connecting the Dots
2007 – 2010**

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CCHSA Patient Safety Strategy – Phase 2 Strengthening Capacity and Connecting the Dots 2007 – 2010

Background: CCHSA and Patient Safety

In 2003, in recognition of the increased focus on patient safety both nationally and internationally, Council engaged in the development of a position paper that explored the accreditation program's focus on patient safety. To supplement the recommendations identified in the paper, a national consensus meeting was convened to solicit input and advice regarding current and emerging issues facing the healthcare community. The increasing focus on the safety of patient care was identified as a clear healthcare priority. In recognition of the important focus that accreditation could bring to this work, Council embarked on the development of a strategy to enhance the focus on patient safety across all elements of its accreditation program.

In May 2003, the CCHSA Board approved Phase 1 of its Patient Safety Strategy and in October 2004, CCHSA's Patient Safety Advisory Committee was convened to provide direction and advice on the strategy's implementation.

Since this time, key elements of the accreditation program have been enhanced, partnerships mobilized, and research and educational opportunities have been fostered, all with a particular focus on patient safety. In concert with these activities, the national and international focus on patient safety has continued to increase at a rapid pace.

It is timely to assess the current context, identify key enhancements to the accreditation program, strengthen capacity, co-ordinate external partnerships and identify research activities with respect to patient safety.

Report Overview

The report provides a brief overview of the key influences that have underscored the focus on patient safety within healthcare in recent years. It highlights the significant activities that have been undertaken within the context of patient safety and accreditation from 2003 - present. Based upon these external drivers and internal progress, the report identifies recommendations to guide Council's leadership role and program initiatives in support of moving the national patient safety agenda forward. Setting the direction from 2007-2010 will provide a solid framework from which CCHSA will continue to be responsive to the changing healthcare environment and continue its role as a national leader in setting the bar for quality and safety in healthcare in Canada.

Patient Safety: Setting the Context

Enhancing patient safety in healthcare settings continues to receive much-deserved attention from both healthcare consumers and providers, nationally and internationally. Seminal reports including the US report *To Err is Human: Building*

a *Safer Health System*¹ and the Canadian report *Building A Safer System: A National Integrated Strategy for Improving Patient Safety in Canadian Health Care*² have clearly positioned patient safety at the centre of focus for healthcare delivery. From an international and national perspective, the creation of the World Alliance for Patient Safety and the Canadian Patient Safety Institute has signalled strong support for strategies and resources to enhance the safety of healthcare.

From a quantitative perspective, the *Canadian Adverse Events Study: The Incidence of Adverse Events among Hospital Patients in Canada*³, arguably “Canadianized” the prevalence and scope of safety related errors in Canadian hospitals. This study, the first of its kind in Canada, galvanized the focus on patient safety, and provided solid, evidence-based issues around which the healthcare community mobilized.

While a listing of the myriad of initiatives, local, national and international are beyond the scope of this paper, it is important underscore the significance of these initiatives, and the breadth and scope of players around the world who are engaged in moving the patient safety agenda forward.

Role of Accreditation

Given this context, Council has a prominent role to play in setting standards of excellence and an accreditation process that focuses explicitly on safe care. As a key stakeholder in the Canadian healthcare community, CCHSA is committed to providing an accreditation program that is focussed on supporting organizational capacity to deliver healthcare services that are of high quality and are safe.

CCHSA’s Patient Safety Strategy 2003-2007

Phase 1

In October 2004, CCHSA convened its Patient Safety Advisory Committee to provide direction and advice on the implementation of the Phase 1 Strategy. The advisory committee included key stakeholders and CCHSA’s partners in patient safety including the Canadian Patient Safety Institute (CPSI), Institute for Safe Medication Practices (ISMP, Canada), Health Care Insurance Reciprocal of Canada (HIROC), Canadian Medical Protective Agency (CMPA) and the Canadian Institute for Health Information (CIHI). Since this time, the committee has guided the implementation of the strategy, which focused on four key areas: 1. Accreditation Program

2. Information, Communication and Education
3. Research
4. Partnerships

A summary of the key initiatives driven by this framework include:

- specific patient safety standards and criteria throughout all program standards
- development of specific standards focussed on high-risk care environments (Operating Room, Surgical Care, Medication Management, Infection Prevention and Control, Diagnostic Imaging, Laboratory services)
- targeted patient safety practices (Required Organizational Practices)
- identification of core patient safety performance measures
- patient safety section of organization accreditation reports
- national health accreditation reports – profile of

- patient safety recommendations/themes
- patient safety specific education sessions (organizations & surveyors)
- establishment of national partnerships to enhance alignment and knowledge sharing on key patient safety priorities

Since 2004, CCHSA has significantly enhanced its focus on patient safety. Building on this work, considering key drivers in the external environment and feedback from surveyors, member organizations and CCHSA staff, the following framework is proposed.

The framework for Phase 2 of CCHSA's work in patient safety is focussed on four key areas, with key actions associated with each. The framework will ensure that CCHSA's focus on patient safety continues to advance in a strategic and coordinated way.

Phase 2

Strengthening Capacity and Connecting the Dots

1. Advancing the Accreditation Program
 - a. Strengthening safety-specific standards
 - b. Developing sector-specific required organizational practices
 - c. Determining the role of adverse and sentinel-event occurrences
 - d. Identifying performance measures
2. Building Surveyor Capacity
 - a. Strengthening knowledge
 - b. Developing on-site survey methods and audit tools
 - c. Expanding recruitment strategies

3. Mobilizing Knowledge Transfer & Leading Practices
 - a. Developing targeted education modules
 - b. Profiling accreditation results
 - c. Facilitating national comparisons
 - d. Identifying and disseminating leading practices
4. Positioning CCHSA & Patient Safety
 - a. Investing in research
 - b. Fostering current and emerging national partnerships
 - c. Strengthening CCHSA's International Profile

1. Advancing the Accreditation Program

a) Strengthen safety-specific standards

As patient safety knowledge, evidence and practices continue to evolve, monitoring and evaluation of the accreditation program's focus on patient safety will be critical.

KEY ACTION

- Conduct **annual review and analysis** of emerging patient safety issues and practices and enhance accreditation requirements accordingly.

Initial refinements will focus on issues of continuity and transfer of care between service providers, communication strategies such as hand-offs between service providers, and the patient/family/caregiver role in mobilizing safe care.

b) Develop sector-specific required organizational practices

Evaluation of the initial 21 ROPs indicates that a number of requirements were rated as

not applicable in some sectors. In addition, qualitative feedback suggests that there is a perception that the initial 21 ROPs are strongly acute care focussed.

KEY ACTION

- Adapt the **language** used to describe the existing ROPs to strengthen their applicability to specific sectors
- Introduce new ROPs that reflect safety practices **tailored to sectors** beyond acute care. Initial sector specific ROPs will be developed for aboriginal, home care and long-term care settings.

c) Determine the role of adverse and sentinel events

The CCHSA Board is currently reviewing the role of adverse and sentinel events in the accreditation program. This process will include a provincial and national review of reporting requirements and direction will be identified to guide their role in the accreditation process.

KEY ACTION

- Identify process to include **adverse and sentinel events** within the accreditation process.

d) Identify patient safety performance measures

Council has committed to the inclusion of performance measures as a key component of the accreditation program. The initial set of performance measures, to be released with the program in January 2008 are specific to patient safety.

Several of these performance measures are directly associated with existing ROPs.

This measurement component will enable organizations to use data to track progress and make improvements.

KEY ACTION

- Identify a second set of **patient safety performance measures**, to be aligned with new and/or existing required organizational practices

The ROPs are only one approach used in the accreditation program to highlight particular practices supporting safe care. The program also contains standards that focus on issues of safety. As the program evolves, and the use of performance measures become more widespread, performance measures associated with these standards will be identified.

2. Building Surveyor Capacity

a) Strengthening knowledge

The role of surveyors in the accreditation program is integral to the program's success. With increased specificity of the accreditation standards and the rapid advancement of tools, techniques and emerging evidence pertaining to patient safety practices, the approach to surveyor education must keep pace with resulting demands and expectations.

KEY ACTION

- Develop **surveyor education modules** that focus on determining compliance with specific patient safety requirements.

b) Developing on-site survey methods and audit tools

The new program will require surveyors to use a tracer methodology when conducting the on-site survey portion of the accreditation process. This approach will enable surveyors

to “trace” or “follow” specific issues, such as those related to patient safety, across the organization: from the role of the board and senior management to the front line care provider through to the experience of the client. The tracer methodology will strengthen surveyor capacity to comprehensively assess/evaluate compliance with standards and required organizational practices.

KEY ACTION

- Develop **checklists and audit** tools for use by surveyors when conducting particular tracers. Initial checklists/audit tools will be developed to support the assessment of medication management and infection prevention and control standards.

c) Expanding recruitment strategies

Surveyor recruitment strategies must consider the expertise required to support the increasing focus on key issues of safety throughout the accreditation program.

KEY ACTION

- Recruit surveyors with expertise in patient safety specific standards that will form a key component of the new accreditation program

Recruitment opportunities will build upon existing partnerships with key stakeholders in the healthcare community (ie. CHICA, CSA, ISMP etc)

3. Mobilizing Knowledge Transfer and Leading Practices

a) Developing targeted education strategies

Since 2004, Council has offered a one-day patient safety workshop that has included a broad range of patient safety topics addressed in the accreditation program. A more specific focus on evolving patient safety concepts, terms, tools, and techniques is required to support compliance with patient safety standards, required organizational practices and performance measures.

KEY ACTION

- Develop **patient safety education modules** targeting specific patient safety requirements, with a particular focus on requirements particular to care settings, i.e., long-term care, home care and community settings

The modules may include the use/application of prospective analysis tools; medication reconciliation, culture of safety etc. The modules will be developed considering the use of e-learning methodologies.

b) Profiling accreditation results

Over the past 4 years, a National Health Accreditation report has been developed that has provided public information about the trends and issues revealed through accreditation surveys. This report has included a particular focus on issues related to patient safety. It has been suggested that a more streamlined, focussed approach to disseminating accreditation results may be more appropriate.

KEY ACTION

- Publish an annual “**Safety Bulletin**”, profiling patient safety issues generated through the accreditation process, results of performance measures data, leading practices, patient safety education and learning opportunities.

c) Facilitating national comparisons

KEY ACTION

- Publish **annual national accreditation results** on a core set of standards, required organizational practices and/or performance measures

d) Identifying and disseminating leading practices

As the accreditation program has continued to strengthen patient safety requirements, organizations require access to examples of leading practices to inform their work and ensure compliance.

KEY ACTIONS

- Implement a process for organizations to **self-identify patient safety leading practices and post practices** on CCHSA’s leading practice database
- Refine and increase the specificity and usefulness of CCHSA’s **leading practice database**
- Establish **linkages with stakeholder** organizations to increase access to leading practices relevant to accreditation requirements

4. Positioning CCHSA & Patient Safety

a) Investing in research

Phase 1 of Council’s patient safety strategy increased the focus on patient safety requirements throughout the accreditation program. Phase 2 of the strategy will focus on utilizing accreditation data for research purposes.

KEY ACTION

- Complete **two internal research projects** examining the role of accreditation and patient safety. Research topics will be identified with a particular emphasis on issues related to home, community, long-term care and workforce.

b) Fostering current and emerging national partnerships

The establishment of national and provincial partnerships has been a key success factor in Council’s patient safety strategy to-date. As the focus on patient safety continues to expand, continuing to strengthen these partnerships will remain a priority.

KEY ACTION

- Host bi-annual **Patient Safety Roundtable**

Invited participants will target national patient safety stakeholders, including those involved in patient safety beyond the acute care environment. The purpose of the roundtable will be to share information, support the coordination of activities and to identify opportunities to enhance/align the accreditation program’s focus on patient safety.

c) **Strengthening CCHSA's International Profile**

Over the past five years, there has been a significant increase in the accreditation program's focus on patient safety. As a result, Council has played a key role in influencing the national patient safety agenda. Based upon this recognition, it is timely to profile the program internationally, and to develop partnership opportunities with international stakeholders.

KEY ACTIONS

- Develop an **international strategy** to increase profile of the accreditation program's role in patient safety
- Present the accreditation program's focus on patient safety at one **international conference annually**
- Secure involvement and participation in **international networks** of patient safety stakeholders

Conclusion

With the launch of the Phase 1 Patient Safety Strategy in 2004, CCHSA's accreditation program has significantly enhanced its focus and elevated its profile with respect to key issues of patient safety. A key factor in this success has been the leadership and commitment of CCHSA's Patient Safety Advisory Committee. CCHSA recognizes and sincerely appreciates their engagement and dedication to ensuring the quality and safety of health care services across Canada.

Over the next four years, CCHSA's focus on patient safety will continue to be developed as part of the new program. To support this continuity, the second phase of the patient safety strategy will be guided by the New Program Advisory Committee. CCHSA will involve members of PSAC in the National Patient Safety Roundtable and in project specific patient safety activities within the context of the Phase 2 Patient Safety Strategy, where appropriate.

Phase 2: *Strengthening Capacity and Connecting the Dots* provides a road-map to address current needs through focussed supports for surveyors and organizations. It provides specific activities to enhance the program's continued focus on patient safety, foster knowledge exchange, networking and partnership and increase international visibility of the accreditation program with respect to patient safety.

Collectively, this framework provides a solid platform from which CCHSA will continue to be responsive to the changing healthcare environment and strengthen its role as a national and international leader in setting the bar for safety and quality in healthcare.

Footnotes

¹ Kohn, L., Corrigan, M., and Donaldson, M., 1999; retrieved from web on April 20, 2007 at http://books.nap.edu/html/to_err_is_human/exec_summ.html

² National Steering Committee on Patient Safety, 2002; retrieved from web on April 20, 2007 at http://rcpsc.medical.org/publications/building_a_safer_system_e.pdf

³ Baker et al. (2004), CMAJ • May 25, 2004; 170 (11), pages 1678-1686

***CCHSA IS THE LEADER IN RAISING THE BAR
FOR HEALTH QUALITY***

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