



Expertise on Certain Uncertainties Principles of Patient Safety in Primary Care

Antoinette de Bont

- The contribution of primary care to health.
- Adverse events in primary care.
- Challenges for managing patient safety in primary care.

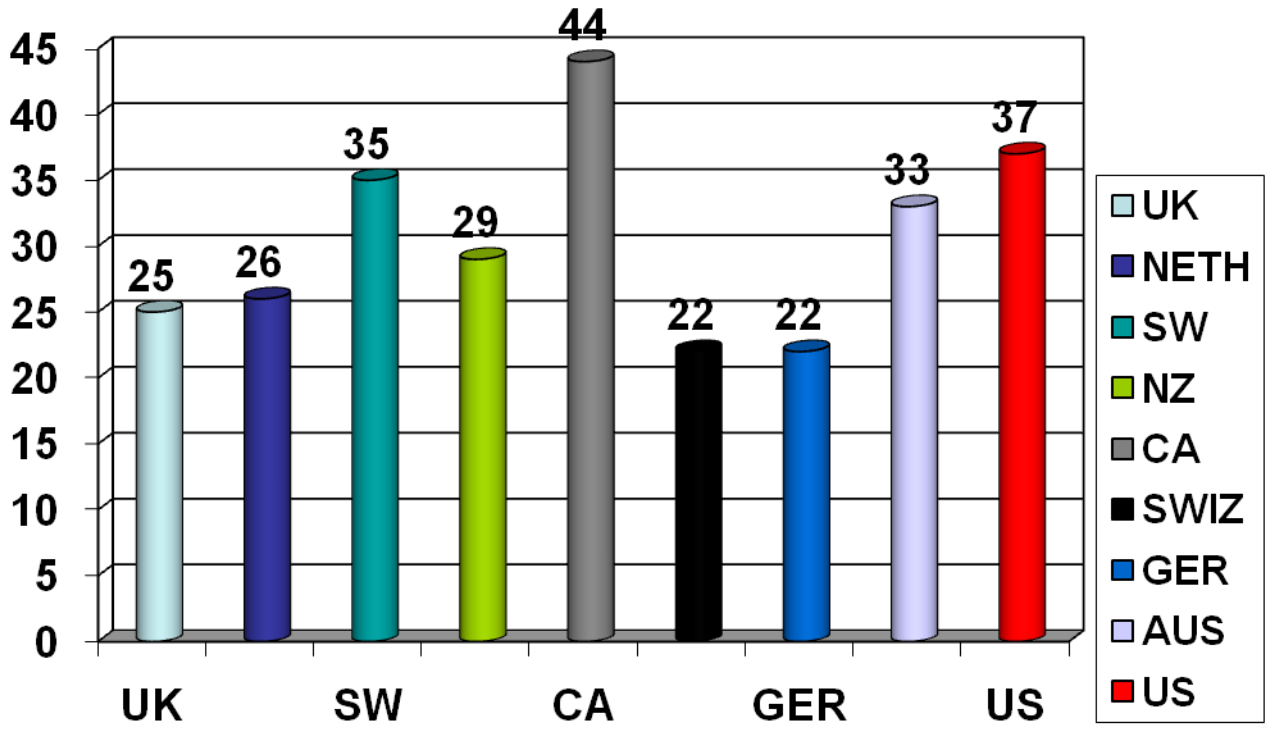
Cost related Access Problems

%	NETH	UK	SWI	SWE	NZ	CA	GER	AUS	US
Did not fill prescrip-tion or skipped doses.	3	3	4	7	7	10	6	12	21
Had medical problem but did not visit doctor.	2	2	6	5	9	4	16	13	22
Skipped test, treat-ment or follow up.	3	3	4	4	8	4	10	14	22





Emergency Room Use in the Past Two Years





Superfluous Doctors

*"Superfluous Doctors"—what a phrase to rouse
Dulled prison fires to flicker with the muse
And build a brave new world. There, there would be
No famines, wars, or other acts of God
To break the Peace on Earth. No! man would turn
From wanton killing of his cousin's kin
To face his very foes, and Science, Art
With Labour in ally, would fight and kill
Want and its fears, disease, its very roots,
Squalor and filth and loneliness and pain,
And then let the doctors quit the centre stage
To usher in the prophylactic age.*

*But death was near and hunger, and prisoner's dreams
were rare.
The doctor in Salonica sat down and tore his hair.*

Does a strong primary care system make a difference for patient safety?





The risk for safety in home care

- The setting of individual homes is unregulated and uncontrolled.
- Care is provided by patients, family members or informal caregivers.
- *The setting of hospitals is regulated and controlled.*
- *Care is safe when provided by professionals.*

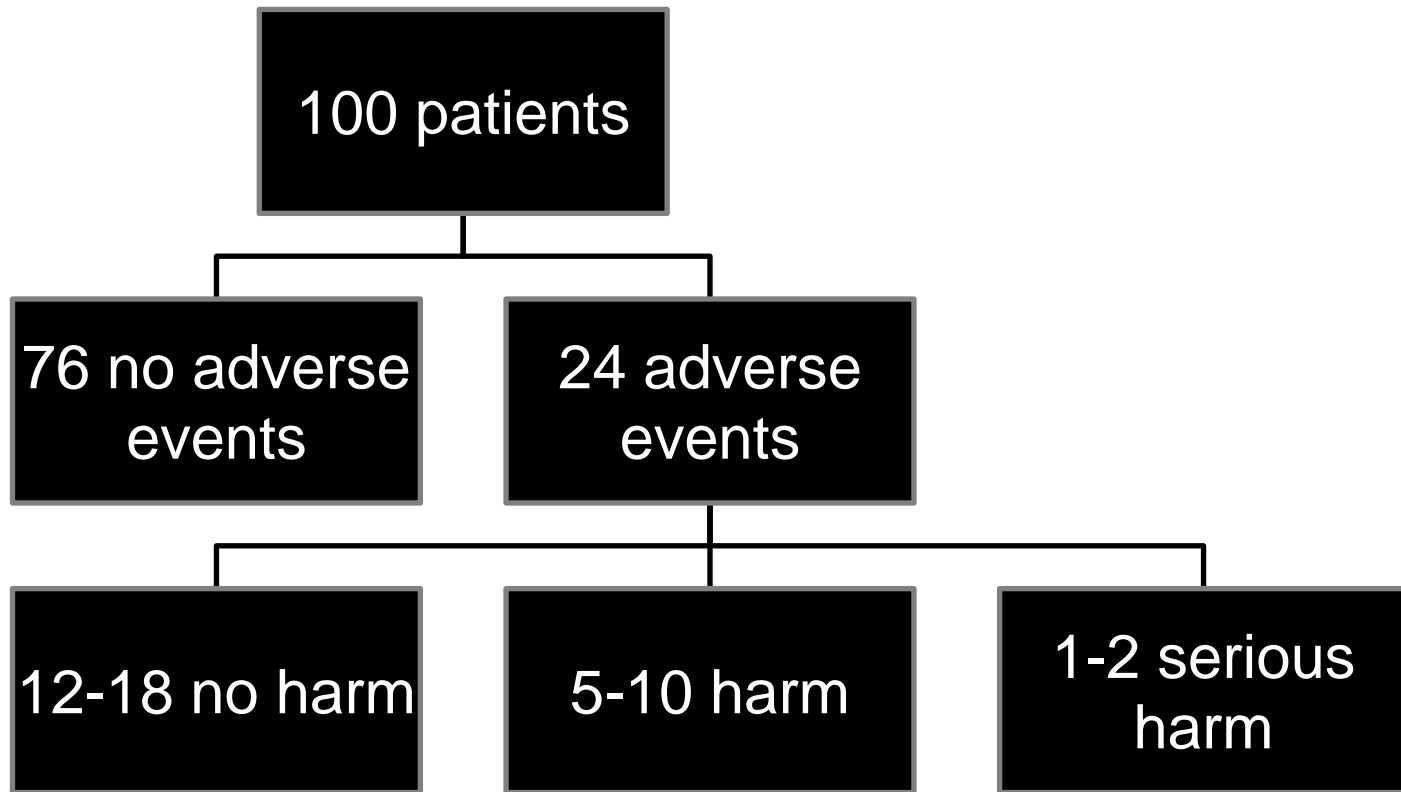
Adverse events in primary care

- Medication errors (wrong drug, wrong dose)
- Diagnostic errors (cancer, fractures, infections)
- Communication errors (lab results, discharge letters)

Unintended harm in primary care

- Falls
- Unintended weight loss
- Emergency room visits
- Hospital visits/admissions

In numbers





- *The first field of the reporting system was kind of disappointing; it had all kinds of minor process errors and all that.*
- *It is all about organizational issues. We don't think it enhances patient safety because our care is already very safe.*

Quality of
care

Risk
management

Patient
safety



Routine risk problems

Complex risk problems

Uncertain risk problems

Ambiguous risk problems

Lessons from risk management

- Uncertain and ambiguous risk problems should be not be managed like routine risk problems;
- Policy makers and managers tend to manage uncertain and ambiguous risk problems like routine risk problems.

Source: IRCG







- Do policy makers and managers tend to manage patient safety as if all problems are routine risk problems?
- What do policy makers and managers overlook when dealing with patient safety?
- How could policy makers and managers deal more effectively with different types of risk problems?

All risk problems as routine risk problems?

2011 Ambulatory Care National Patient Safety Goals

The purpose of the National Patient Safety Goals is to improve patient safety. The goals focus on problems in health care safety and how to solve them.

Identify patients correctly

NPSG.01.01.01

Use at least two ways to identify patients. For example, use the patient's name *and* date of birth. This is done to make sure that each patient gets the correct medicine and treatment.

NPSG.01.03.01

Make sure that the correct patient gets the correct blood when they get a blood transfusion.

Use medicines safely

NPSG.03.04.01

Before a procedure, label medicines that are not labeled. For example, medicines in syringes, cups and basins. Do this in the area where medicines and supplies are set up.

NPSG.03.05.01

Take extra care with patients who take medicines to thin their blood.

NPSG.03.06.01

Record and pass along correct information about a patient's medicines. Find out what medicines the patient is taking. Compare those medicines to new medicines given to the patient. Make sure the patient knows which medicines to take when they are at home. Tell the patient it is important to bring their up-to-date list of medicines every time they visit a doctor.

Prevent infection

NPSG.07.01.01

Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning.

NPSG.07.05.01

Use proven guidelines to prevent infection after surgery.

Prevent mistakes in surgery

UP.01.01.01

Make sure that the correct surgery is done on the correct patient and at the correct place on the patient's body.

UP.01.02.01

Mark the correct place on the patient's body where the surgery is to be done.

UP.01.03.01

Pause before the surgery to make sure that a mistake is not being made.

What is overlooked?



Dealing with patient safety

- From tools to research.
- Learning from controversies.



Principles for patient safety in primary care

- The most important contribution of primary care to patient is preventing unnecessary interventions.
- We should not overestimate or underestimate or risks in primary care.
- The research and policy agenda for patient safety in primary care should include uncertain and ambiguous risk problems.

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WVFS

