

The Deconstruction of Patient Safety and the Way Ahead

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In the rush to practice patient safety, and thereby improve the delivery of healthcare, few spend much time reflecting on what they do. This is an understandable attitude, since there always are substantial pressures to improve things – which usually means reducing the number of certain events or outcomes. When the first rush is over, which often coincides with the grim realisation that the efforts have not yielded the intended results, it may be time to reflect on what was actually done. Such reflections must also ask the question of what patient safety actually is. One way of doing that is to consider whether the meaning and contents of patient safety is derived from the various indicators that are used in practice, or whether the indicators are derived from an independent understanding of what patient safety is. This ‘deconstruction’ of patient safety is analogous to taking a machine or a clock apart to find out what is inside and how it works. However, unlike machines and clocks there may be more than one way of reassembling or reconstructing the parts. By understanding what patient safety is and how it works, it may be possible to reconstruct it in a better way.