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8 minutes on

Patient Safety in Undergraduate Curricula – an Essential Challenge, and Opportunity for Interprofessional Collaboration

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Background

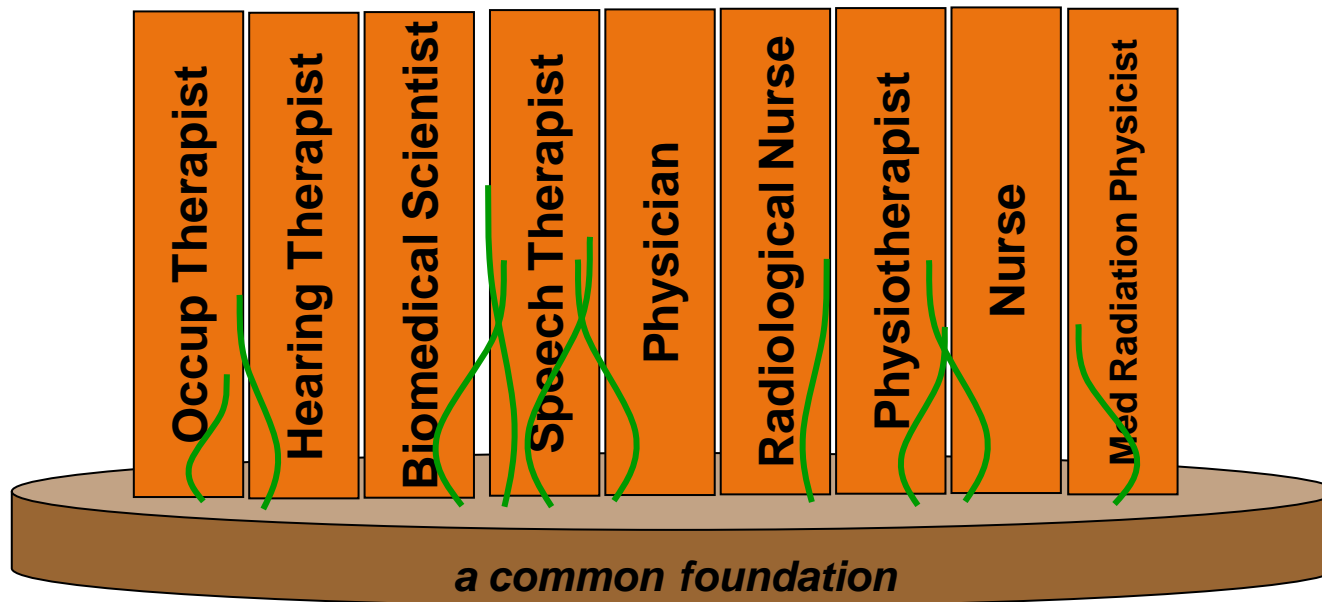
- The **necessity of introducing Patient Safety** in undergraduate curricula has been discussed for a number of years, and some educational institutions have started teaching activities on the subject.
- In 2009, a **proposal of a mandatory multiprofessional course** “Introduction to Patient Safety” was presented to the Lund University Faculty of Medicine...



Background – a Course Proposal

”To give possibility to ’taste’, different basic aspect of the subject”

Main Objective: to create a **”culture”**, a **foundation**, which promotes a natural **common safety thinking** which permeates **all student categories**



Background - the Course proposal

”Introduction to Patient Safety” (16 hours)

Introduction and risk areas

We do mistakes - Frequent risk areas. Different models, Safety culture

Safety in using technology in health care

Safe handling of medical devices, Safety in technical systems

Accidents – how to avoid, and how to learn by mistakes

Risk analysis, Event analysis, Incident reporting

And then ... - risk management in the daily work

Comunication and roles, leadership, different tools as checklist etc



Background

– “Yes, but let’s first consider the present situation”

- **A survey of ongoing activities** on patient safety in all undergraduate programs was initiated.

At the same time...

- Student assessments point out that many **students feel inadequately prepared to work in collaboration with other health care professionals**: an issue evident especially for the medical students.



Two challenges, and needs, to be met...

- **learning basic patient safety thinking**

and

- **preparing students to work in collaboration with other health care professionals**



The survey on Patient Safety activities

Questions to be answered:

- 1) What aspects of Patient safety are already included in the Programs
- 2) When should these teaching activities be scheduled
- 3) How to do it - according to "best evidence"



The survey on Patient Safety activities included

Undergraduate Programs:

Occupational Therapist

Hearing Therapist

Biomedicine

Speech Therapist

Physician

Radiological Nurse

Physiotherapist

Nurse

Medical Radiation Physicist



The survey included

Master's Programs:

Public Health (international)
Sports Medicine (international)
Biomedical Laboratory Science

Midwifery

Nursing with specialisation on i.e.
Pre-hospital (ambulance-) care
Anaesthesia
Child health care
Intensive care
Oncology
Psychiatric care
Gerontologic care



Survey

1) Results of Activities

- **Large variation between programs**
- **Generally: uneven, isolated elements, insufficient structure:** Students and teachers don't recognize "Patient safety" as a clear ingredient of the programs (with a few exceptions)
- **Generally: a too narrow view of the subject – very little, or nothing, on "safety culture"**
 - not enough to learn methods and new tools...



Survey

2) When to introduce Activities ?

- **”- that which is important, you say first”**
Could be lifted up on a Introduction day, common for all students at the faculty (as one of the most important challenges in todays health care...)
- **Reoccurring during a number of occations during the programs**
 - Start-up in Introductory Courses
 - reoccurring before and during periods of practical training
 - part of ”threads” which encompass subjects as organizational and legal aspects, leadership, etc.
- **Important: to get a clear structure which binds different Patient Safety itmes together**



Patient Safety



Survey

3) How to do it ?

- **Factors of Success: point out items which focuses on the good culture**
 - not enough to learn about methods and tools
- **Multiprofessional team-training**
 - communication, leadership, responsibility-accountability
 - training/practice in a safe environment
- **Example: WHO Patient Safety Curriculum Guide For Medical Schools (2009)**, based on the Australian Patient Safety Education Framework

11 items of 60-90 minutes each, Pilot studies running at ten universities (world-wide), to be finished during 2010



Survey

3) How to do it ?

- **Integrate items as parts of practical training/skill training**
principles in their right context
- **Safe and supportive environment**
challenging but not frightening, learning by own experiences
- **An new Culture "must grow" in each individual**
 - each person has to be led into familiar situations, to experience relevant situations,
to mirror/ be aware of oneself, and one's own emotions
- **Need for concurrent education of working health care personal, which supervise students during periods of practical training**
trainer days – to engage and update trainers on what the students learn
- **"See yourself as a patient"**
e.g. through Process Mapping/Analysis



Back to the two challenges...

- **learning basic patient safety thinking**

and

- **preparing students to work in collaboration with other health care professionals**



What we have started

- In order to enhance the situation on these two aspects, we have
 - **introduced patient safety** as one example of **multiprofessional learning activities**.

By letting students from different programs of the faculty meet and interact on safety issues, they get the opportunity to learn about one another's professions, knowledge areas and roles, as well as to lay a common foundation on patient safety issues.



How it has been received

- Introducing patient safety items, has been very appreciated by the students and they find it very important and useful.
- Meeting in multiprofessional settings, with time for discussions and team training, has also been appreciated and highly valued by the students.



Learning Patient Safety

- Future Plans

- **Early introduction** of “Patient Safety”: during the first semester in every program, if possible by means of interprofessional meetings
- **Reoccurring** items throughout the whole programs
- **Promotion** of interprofessional itmes, e.g.,
 - joint projects for different student categories.
 - joint candidate and master theses,



Conclusion

- Introducing patient safety in a multiprofessional environment is an essential part in the process of developing an enhanced “safety culture” for the future.
- Due to the complexity: not starting by delivering all the “right” answers, but facilitating the act of sharing and reflecting.
- With time, and in conjunction with practical training, provide methods and tools to deal with different situations.



Litterature, and web-sites

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Proposal for development of module on patient safety for undergraduate curricula. School of Medical Education Development, NPSA proposal, January 2004. www.ncl.ac.uk/meDEV/assets/documents/NPSABID.pdf

Summary of “WHO patient safety curriculum guide for medical schools”:
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