

Physician's Role in Patient Safety and Risk Management: What's in it for me?

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Background

Healthcare safety profile came into the light after the publication of *To Err Is Human by Institute* of Medicine in 1999, which indicated that 44,000 to 98,000 unnecessary deaths occur every year in US hospitals. Since then many hospitals around the world are beginning to establish measures to improve safety. Physician leaders are an important factor in the improvement of safety and quality within hospitals and there is emerging evidence that physician leadership contributes to improved care. While KK Women's and Children's Hospital (KKH) acknowledges the importance of physician participation in quality improvement, in reality their involvement continues to present challenges for physicians. Most of the challenges are attributed by informal traditional consultant-based relationship where physicians were tasked to serve at committee level with little autonomy to effect change, and there is also insufficient formalized training in safety knowledge and quality improvement that could help to strengthen their perspectives. Having identified the gaps and the need to move from governance to sharing of power to coproduce change, ideas were sought from people among various levels including the physicians and other middle level organisation's healthcare professionals to drive safety culture change with Safety and Reliability as one of the top three strategic priorities.

Aim

To engage and create space for physicians to champion Patient Safety and Risk Management Initiatives.

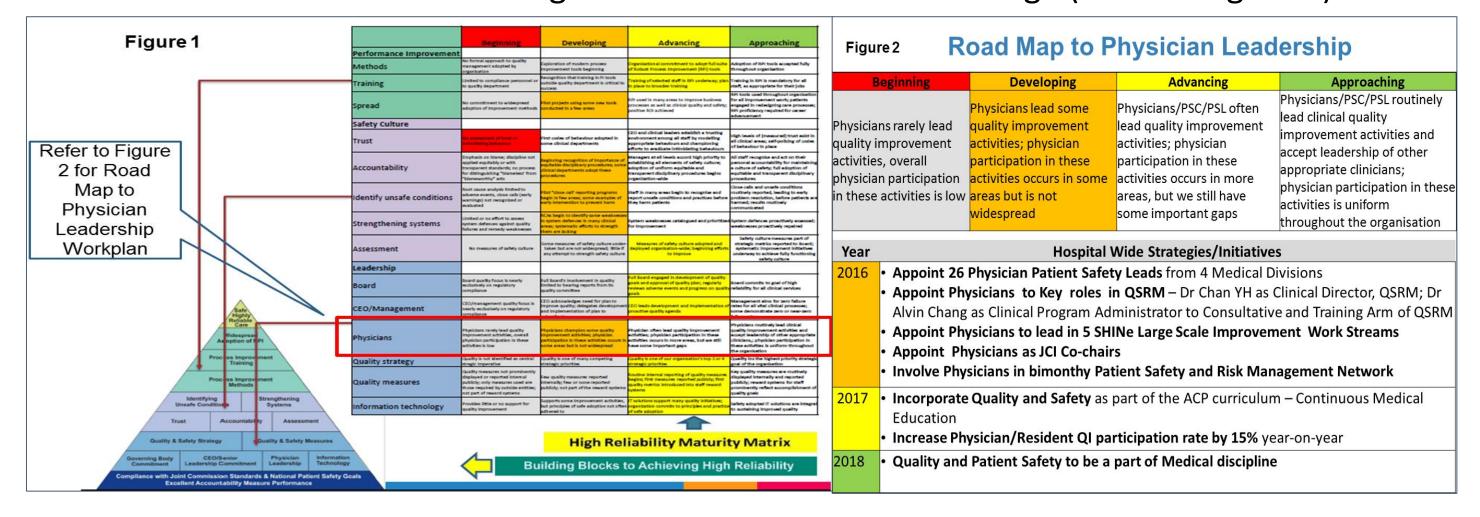
Methodology

CEO leads the development and implementation of proactive quality and safety agenda with target zero harm as a goal. 27 Physician Patient Safety Leads (PSLs) from different disciplines were appointed to work hand-in-hand with other 52 PSLs from Nursing, Allied Health and non-clinical disciplines to champion safety. Head of Departments at all levels accord high priority to establishing safety culture. Two Patient Safety Officers (PSO) with medical background were recruited and tasked to provide support to physicians from various divisions to effect their roles and responsibilities regarding patient safety and risk management. The PSOs (refer to diagram below) served as a liaison and facilitate physicians participation in patient safety activities with staff of their department, and with office of Quality, Safety and Risk Management (QSRM) as support to the initiation and coordination activities to promote engagement of front-line physicians, physician leaders and Patient Safety Council.

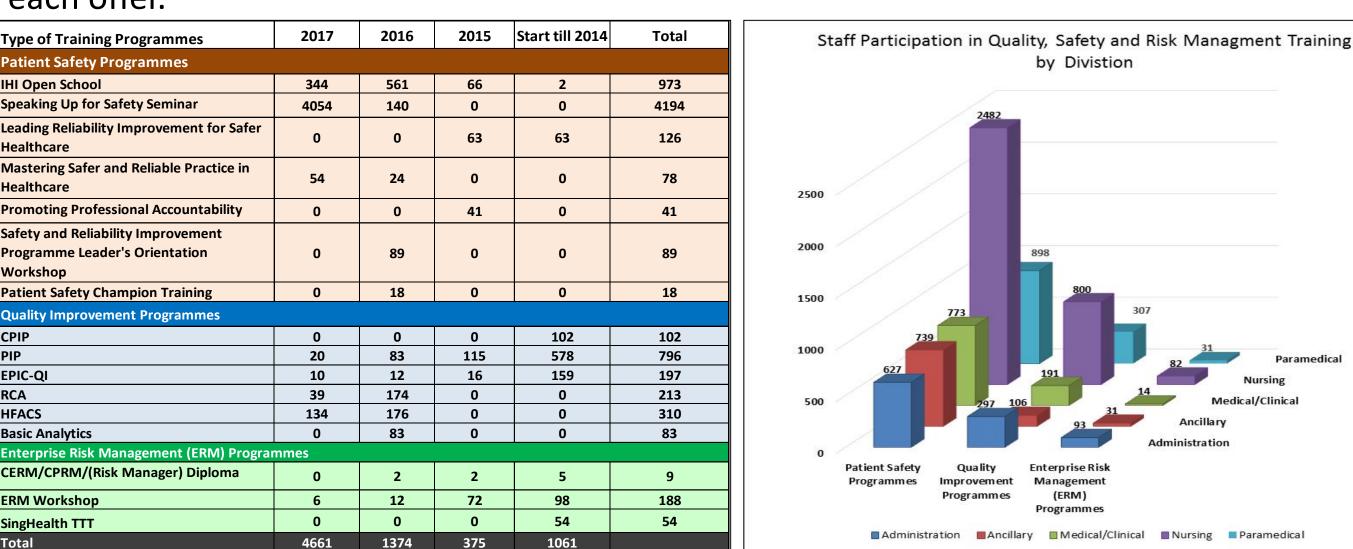
Sharing Powerful – Co-production Model in Patient Safety



QSRM supports the hospital in planning, initiation and execution of programmes. JCI framework on Building Blocks to Achieving Safety and Reliability (refer to Figure 1) was adopted to guide the development and establishment of the required programmes to build improvement in stages. The road map is strategically planned with programmes initiated in each of the element in the building block to create a culture change (refer to Figure 2).



A Training and Consultative Arm was established within the QSRM structure to map and establish improvement capability through building training programme at a scale to equip Physician Leads and Champions with needed knowledge and skills to carry out their role (refer to chart below on training participation by division). Each of the programme places strong emphasis on engaging and connecting people together to improve the quality of care each offer.

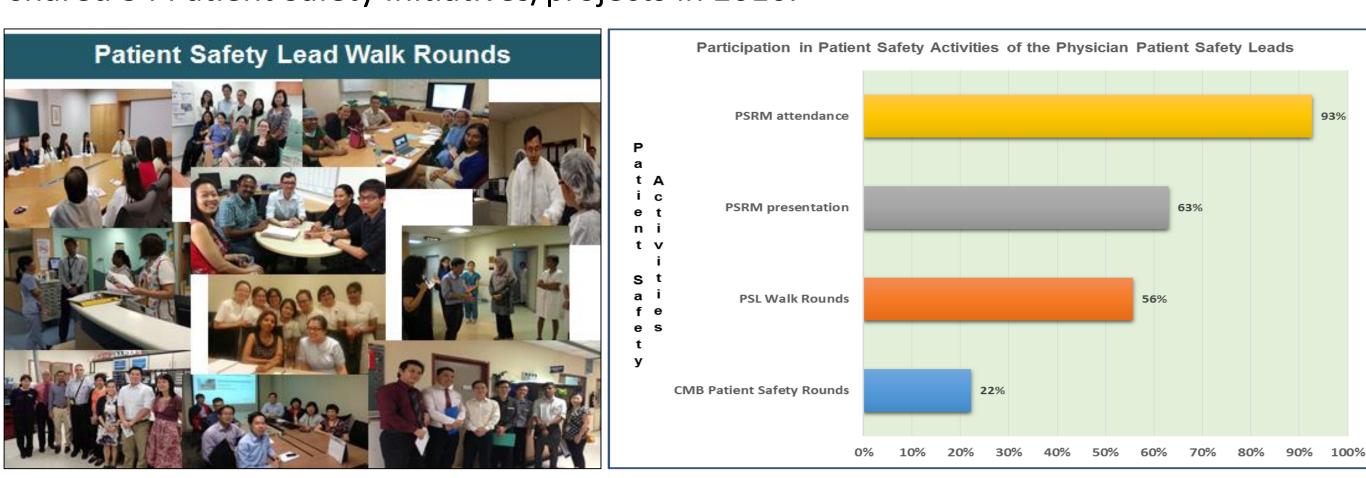


Results

Strong physician leadership and support and is critical to the achievement of safety culture. In KKH, physicians see quality and safety as part of professional development opportunity that increases their value of their care delivery. The following are the outcomes achieved.

Patient Safety Leads (PSLs)

27 PSLs within 4 Medical Divisions – Led and conducted 15 Patient Safety Rounds and shared 34 Patient Safety Initiatives/projects in 2016.



KKH has also initiated the following as drivers to achieve Zero Harm Target by 2022:

- Speak Up for Safety use of Safety C.O.D.E
- 100% Hand Hygiene Compliance
- JCI Standards in our daily practice

Physician Patient Safety Champions (PSC)



6 Senior Physicians were appointed as Patient Safety Champions (PSCs) among other in various disciplines. At divisional level, a trusting environment were established through frequent dialogue within the senior level aiming at aligning physicians' interests.

Physicians serve as Trainer to conduct to Speak-up for Safety Seminar (SUFS):

Out of 18 PSCs who were certified by Cognitive Institute, 6 are Physicians (33%). KKH target to train all KKH employees by mid of 2017, within less than 5 months period, more 85% of staff has already completed the SUFS and is taught to use Safety CODE to raise concerns.

Physicians Leadership Role in Quality, Safety and Risk Management

Senior Physicians are given leadership roles under QSRM to drive and support hospital's Quality, Safety and Risk initiatives (refer to Figure 2). More than 10 Physicians were drawn to lead strategic safety initiatives and quality improvement activities through enlistment, engagement with visible leadership support and huddle through network sessions. There are 5 workgroups embarked on 3 Large Scale Initiative (LSI) work streams, namely Medication Safety, Surgical Safety and Healthcare Associated Infections.











The work streams focus on 30% harm reduction by 2017 and following were achieved:

- Opioid Safety 100% Compliance Rate to Opioid Safety Protocol which contributed to zero medication events from post-operative opioid used.
- Venous Thromboembolism Prophylaxis Won SingHealth Target Zero Harm Award 2016
- Overall KKH hand hygiene rate: 2015 was 78.6% to 88.8% in 1st Quarter of 2017.
- Catheter-Associated Urinary Tract Infection 240 days since the last Symptomatic CAUTI in Ward 43 (pilot).
- Surgical Safety Antibiotic prophylaxis 86% of patient undergone Elective Caesarean section has peri-operative prophylaxis administered within 15 to 60 minutes window period.

Enterprise Risk Management Projects

In 2016, out of 46 Enterprise Risk Management projects, there were 22% with physician participation.

Conclusion

Physician support is critical to the achievement of safe culture therefore constant dialogue that aimed at aligning physicians' interests is helpful given their limited availability. Healthcare organisation must see the value of physicians support and made quality and safety as part of their professional development opportunity to improve care delivery. Our success story is attributed by the strong support of senior leaders and the well-thought vision with engagement of all level of staff. In the transforming culture, the hospital understands that it has to begin with a strategy and with deliberate plan of action.