„Patient Safety - Strategy is Key“


15th April 2018

Dr. med. Günther Jonitz, President of Berlin Chamber of Physicians
Patient Safety is real!

„DOCTOR’S MISTAKES
For the first time doctors talk about their failures!“
About the origin of Patient Safety

- **Medicine**  Successful and complex
- **Patients**  Multimorbid and demanding
- **Economics**  Decreased funding and trust, bad working conditions
- **Lack of Staff**  „Why are doctors so unhappy?“

(BMJ May 2001)

Double need for action!
Many possibilities for action!
Options for Action

New procedures and tools for prevention of incidents

✓ Critical Incident Reporting and Learning Systems
✓ Root cause analyses
✓ Professional Training, CPD, Simulation Training, „nontechnical“ skills
✓ Certification, Procedures, Management know how,

(Quality Management, Risk Management, importance of role models and leadership in medical work ...
Goal: Change of culture: Promote action and acceptance!

„Getting to the hearts of the doctors and nurses!“

→ Positive framing!
→ „WHY“ not „WHO“

„You must choose between fear or safety“

15th April 2018, Gunma, Japan

Key messages

It is not just a problem, it is a **chance** and invitation to take action for patient safety

⇒ „bad issue, but glad news!“

80% of all harms are due to bad organization

⇒ „Be honest but don‘t feel guilty!“

Various institutions, stake holders and people are there to support you on promoting the patient safety issue

⇒ „You are not alone!“
Be honest: there is a problem
Be positive: there are solutions!
Be traditional: „PRIMUM NIL NOCERE“
Stay professional: It is your agenda and your credibility
Essentials for Patient Safety Culture

☑ Leadership - to promote action
☑ Participation - everybody is involved
  (no “king of Patient Safety”)
☑ Shared knowledge - about solutions
☑ Common values - common goals
☑ Attitude - PS is an essential part of professionalism and of learning!

“win - win - win - situation”
The German Coalition for Patient Safety (GCPS)

Building a network organisation

Including - from the beginning - all relevant players of the German health care system

http://www.aktionsbuendnis-patientensicherheit.de/
GCPS-Characteristics

✓ Based on voluntary, honorary engagement and enthusiasm of members, activists and their organizations
✓ The persons and parties involved are of full integrity, recognized and competent
✓ Credibility based on independence
✓ Bundling of Know how
✓ Multidisciplinary networking
✓ Based on experience „from practice for better practice“
✓ Providing: trust, knowledge, tools, cooperations
✓ Common responsibility!! No „King of Patient Safety“

http://www.aps-ev.de/recommendations-in-english/
Nationwide CIRS

[Quelle: http://patientensicherheit-online.de/cirs/netzwerk-cirsmedical.de, abgerufen am 4.8.2017]
Success factors of the German strategy

- Leadership by professionals and leading institutions!
- Bad issue but „good news“!! (Positive framing)
- Taking action! (No more victims - help yourself AND your patients)
- Participation, honesty, appreciation, support, friendliness, cooperation, confidence, common responsibility!
- Free access and share ware of know how and products/ materials (recommendations, scientific results, reports, informations...)
- Involvement of leading stakeholders up to the ministers! (Top-down-revolution)
2005 - „Year of Patient Safety in Germany“

Amendment of the German Medical Assembly

Unanimous vote for Patient Safety Resolution

„I do not know about any other doctor‘s parliament with an unanimous vote in favour of patient safety“

Fiona Godlee, Chief Editor, British Medical Journal 2009, pers. note
The bigger frame of Patient Safety!?

New political strategy!?:

Optimising health care services

instead of

dezimating costs
Optimizing Health Care

- 1919 Autistic-undisciplined thinking in medicine and how to overcome it, Eugen Bleuler
- 1970 The Profession of Medicine, Eliot Freidson
  (“clinical mentality”, “placebo-reactor”)
- 1999 choosing wisely, ABIM,
  - http://www.choosingwisely.org/
- 2002 “too much medicine” BMJ
- 2007 Re-Defining Healthcare, Porter, Teisberg
  - = vale-based healthcare, us-american version
- 2012 Preventing Overdiagnosis. BMJ et al
- 2016 “realistic medicine”, Scot NHS,
  - CMO Catherine Calderwood MD PhD
- 2017 “right care” The Lancet,
  http://www.thelancet.com/series/right-care
Must read! 😊

Managing the Myths of Health Care

Henry Mintzberg
Oakland CA 2017

„anybody working in a hospital who needs a mission statement should seek for a job somewhere else“
The single most important question in health care systems is

How does the system learn?


GJ
The transformation of an unidirectional and blind system („assembly line“)

into a learning system

that is continuously learning from the values achieved is the main challenge and chance for our future and of our patients.

The key principles mentioned above could be the masterplan.
Paradigm shift of Safety Culture on Top Level

„These are the most courageous doctors in Germany“.

[BILD 28. 2. 2008]
Domo arigato gozaimashita

Tokyo, enthronement parade Akihito Tenno 1990

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