Patient Safety Movement Foundation Presents

APSS #17 – Patient Safety Curriculum
Patient Safety Curriculum for All Health Professionals
May 8, 2019

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Expert Presenters:
Steven Scheinman, MD: President and Dean, Geisinger Commonwealth School of Medicine; EVP and Chief Academic Officer, Geisinger Health System
Margrit (Peggy) Shoemaker, MD, FACP: Assistant Chair of Internal Medicine, Geisinger Commonwealth School of Medicine; Chair, Geisinger Patient Safety Work Group
Agenda

• 10 Minutes: Introduction to Patient Safety Movement Foundation and Actionable Patient Safety Solutions (APSS)

• 40 Minutes: Patient Safety Movement Foundation’s Expert Presentation led by
  – Dr. Steven Scheinman & Dr. Margrit (Peggy) Shoemaker

• 10 Minutes: Q & A
Fostering New Efforts and Building On Existing Patient Safety Programs Through Commitments to ZERO
Who Can Take Action?

- **Hospitals & Healthcare Organizations**
  - Make a *Commitment*

- **Committed Partners**
  - Sign the *Commitment to Action* letter

- **Healthcare Technology Companies**
  - Sign the *Open Data Pledge*

- **Patient & Family Advocates**
  - Share their *Patient Story*, Utilize Resources
Actionable Patient Safety Solutions (APSS)

- Culture of Safety
- Patient Blood Management
- Airway Safety
- Healthcare-associated Infections (HAIs)
- Hand-off Communications
- Early Detection and Treatment of Sepsis
- Medication Safety
- Neonatal Safety
- Systematic Prevention and Resuscitation of In-hospital Cardiac Arrest
- Monitoring for Opioid-Induced Respiratory Depression
- Optimizing Obstetric Safety
- Embolic Events
- Mental Health
- Falls and Fall Prevention
- Nasogastric Feeding Tube (NGT) Placement and Verification
- Person and Family Engagement
- Patient Safety Curriculum
- Post-operative Delirium in Older Adults

Download and share our APSS at
www.patientsafetymovement.org/apss
Impact to Date

Hospitals Committed to ZERO

- 2013: 63 hospitals
- 2014: 100 hospitals
- 2015: 515 hospitals
- 2016: 1,624 hospitals
- 2017: 3,526 hospitals
- 2018: 4,598 hospitals
- 2019: 4,710 hospitals
Impact to Date

Lives Saved Annually by Hospitals*

*Numbers are based on self-reported data provided by hospitals
APSS #17: Patient Safety Curriculum
Patient Safety Curriculum for All Health Professionals

Steven Scheinman, MD,
President and Dean, Geisinger Commonwealth School of Medicine; EVP and Chief Academic Officer, Geisinger Health System

Margrit (Peggy) Shoemaker, MD, FACP, Assistant Chair of Internal Medicine, Geisinger Commonwealth School of Medicine; Chair, Geisinger Patient Safety Work Group
PSMF Curriculum Group Charge:

“Create a curriculum that

is adaptable to clinical learners across professional development,

is applicable across health care professions,

emphasizes the benefits of team-based care, and

highlights the patient/family voice in the health care experience.”
Virtues of APSS #17
Patient Safety Curriculum:

Modularity allows for adaptability:

Across developmental spectrum (novice to expert)

Across multiple health professions

Effective for use in part or in its entirety

Suitable for a variety of teaching strategies

Conducive to delivery by non-expert facilitators

Practical time requirements

Experiential whenever possible

Wide range of resource types
Eight fundamental domains of patient safety:

- Error Science
- System Science
- Human Factors
- Technology
- Teamwork/Communication
- Leadership/Leading Change
- Culture of Safety
- Patient Oriented Safe Care
Modular Design:

• **Domain Name**-definition/sticky note
  – Subdomain 1
    • Learning Objectives “a”
      – Examples of competencies
    • Learning Objective “b”
      – Examples of competencies
  – Subdomain 2, etc.
  – Subdomain 3, etc.

• **Resources**
This domain addresses the concept of teams in healthcare delivery and emphasizes the knowledge, attitudes, skills and behaviors required of effective teams to deliver safe care. Prone “gaps” in care are highlighted with content offering validated communication frameworks to ensure patients’ safe transitions across the health care experience.

Subdomains:
1. “Teams” in Health Care
   a. Learning Objective – “(developmental verb) the benefits of effective interprofessional teams and their role in Patient Safety”
      -Examples of competency achieved
2. Handoffs and Gaps, etc
3. TeamSTEPPS, etc.

Resources: role-play materials, videos, cases, local experiences (lay and clinical) for group discussion, online resources, materials for didactics, supplemental readings
TW/C Subdomain 1: “Teams” in Health Care

Learning Objectives-

• **Novice** - *Recognize* the benefits of effective interprofessional teams and their role in Patient Safety (PS)

• **Advanced Beginner** - *Articulate* the benefits of effective interprofessional teams and their role in PS

• **Competent** - *Value* the benefits of effective interprofessional teams and their role in PS

• **Proficient** - *Model* the benefits of effective interprofessional teams and their role in PS

• **Expert** - *Teach* the role of effective interprofessional teams and their role in PS
Examples of Competency:

Novice- Recognize the benefits of effective interprofessional teams and their role in Patient Safety

• Following discussion of case studies **student can identify** benefits of interprofessional teams in patient care.

• Following a didactic session **student can list** essential characteristics of highly functioning interprofessional teams; emphasizing mutual respect, shared values and psychological safety.

• Following a didactic session **student can list** benefits of interprofessional teams that include patient/family voice in patient care.

• After viewing a video depicting consequences of medical error, a **student can reflect** on areas of opportunity linked to use of interprofessional teams that include patient/family voice in patient care.
Resources for Facilitators:

Videos/Patient Stories
Real Life Experiences
On-line resources
Materials for Didactics
Materials for Role Play
Supplemental Readings
Implementation:

**Program Implementation**

1. Crosswalk domain content with existing curriculum
2. Identify gaps
3. Identify opportunities for integration
4. Obtain leadership commitment (Curriculum Committee, Course Directors)
5. Faculty development
6. Etc, etc, etc…
Small steps can lead to BIG changes!
Achievable Implementation:

Step 1: Facilitator pre-work
Step 2: Curricular preparation
Step 3: Engage learners
Step 4: Outcomes assessment
Step 1: Facilitator pre-work

- Review domains/sub-domains (Executive Summary)
- Identify covered content and gaps
- Seek opportunities to *integrate* Patient Safety material in current curriculum
- Seek *practical approaches* to fill Patient Safety curricular gaps
Integration/Addition of Patient Safety existing curriculum

- Pre-Clinical: emphasize relevance to Patient Safety
  - Patient-centered communication
  - Interprofessional education experiences
  - Team building skill development
  - Case-based learning (modified with Patient Safety elements)
- Clinical: opportunity for Patient Safety teaching
  - Reflection on Patient Safety teaching points following clinical experiences
  - Incorporate Patient Safety elements into clinical skills training using standardized patients
  - “Just in time” teaching of Patient Safety principles during clinical encounters
Step 2: Curricular Prep

- Select educational target/gap
- Review learning objectives (LOs) for your learners’ level of development
- Select educational method
- Select teaching material or clinical setting
- Review examples demonstrating LO competency
- Personalize to context of your learners
### Educational Targets:

<table>
<thead>
<tr>
<th>Participant</th>
<th>Foundational Domains</th>
<th>Linking Domains</th>
<th>Aspirational Domains</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Clinical Learner</td>
<td>Advanced Beginner</td>
<td>Novice</td>
<td>Novice</td>
</tr>
<tr>
<td>Clinical Learner</td>
<td>Competent</td>
<td>Advanced Beginner to Competent</td>
<td>Advanced Beginner to Competent</td>
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<tr>
<td>Early Practice (ie GME)</td>
<td>Competent to Proficient</td>
<td>Competent to Proficient</td>
<td>Competent to Proficient</td>
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<tr>
<td>Independent Practice</td>
<td>Competent to Expert</td>
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Example: “Teams” in health care

- Competent – *Values* the benefits of effective interprofessional teams and their role in patient safety.
  - *Participates as a member of an interprofessional team* for the benefit of patient care
  - *Incorporates patients and families* into the interprofessional team to benefit patient care
  - *Demonstrates respect for the contributions of all team members,* including the patient, in the clinical setting to benefit patient care

(Behaviors assessed in practical settings!)
Step 3: Engage Learners

- Set expectations for learners (current course→ healthcare professionals)
- Engage learners with content in a variety of ways (small group, classroom, clinical setting, etc.)
- Learner assessment- debrief, discussion, reflection, observation with feedback, etc.
Step 4: Outcomes Assessment

Learner Outcomes - knowledge, skills, attitudes, behaviors

Curricular Outcomes -
- learner needs met?
- program goals met?
- health system needs met?

Patient Safety Outcomes - measurable impact?
- improved patient satisfaction?
- increased error/near miss reporting?
Our Challenge:

Implement APSS #17 in your curriculum!

Q & A
Save the Dates!

**Midyear Planning Meeting:** Tuesday, September 17, 2019 | World Patient Safety Day
Co-Convened with UC Irvine Health
*Beckman Center of the National Academies of Sciences & Engineering, University of California, Irvine (UCI)*
Request your invitation today!

**Next Quarterly Webinar:** June 12, 2019
Reducing Emergency Department Boarding Time, Hospital Length of Stay, and Inpatient Mortality for Hospitalized Patients after Implementation of an Electronic Throughput Dashboard

**Expert Presenter:** Brandyn D. Lau, MPH, CPH, Assistant Professor of Radiology and Radiological Science & Health Sciences Informatics, Johns Hopkins School of Medicine; Associate Faculty, Armstrong Institute for Patient Safety and Quality, Johns Hopkins Medicine
Thank you!