



Indian Confederation for Healthcare Accreditation

Establishing Validated Excellence

ICHA Initiative on Patient Safety

www.icha.in

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ICHA : Safe Healthcare for All

Future – HCOs!

– Enter at your own risk



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Patient safety

- The Safety Risks
 - Physical
 - Mental
 - Financial



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Patient Safety Issues

- Appropriate care – most critical
- Errors – Adverse reactions, Interactions, Allergies and Prevention.
- Structural Aspects e.g. falls and injuries
- Financial - If Hospitalization is bankrupting, it is a Public Health issue
- Primary & Secondary Prevention
- Communication
- Interlinkages
- Workload distribution
- Infrastructure



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Magnitude / Costs of Unsafe Care

- At any time, hundreds of millions people are suffering from infections acquired in health-care facilities. In intensive care units, Hospital infection affects about 30% of patients and the mortality may reach 44% (USA)
- 234 million major operations worldwide each year. Surgeries are the most complex health services and costliest.
- Countries are estimated to lose between US \$ 6 to 29 Billion p.a. apart from the physical and mental suffering.



ICHA
is all of us!

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Vertical vs. Horizontal Approach

Vertical Programs very successful due
to focus



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Vertical vs. Horizontal Approach

Lot of aggregated vertical programs.....



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Vertical vs. Horizontal Approach

....but coordinated vertical programs
would become Horizontal!



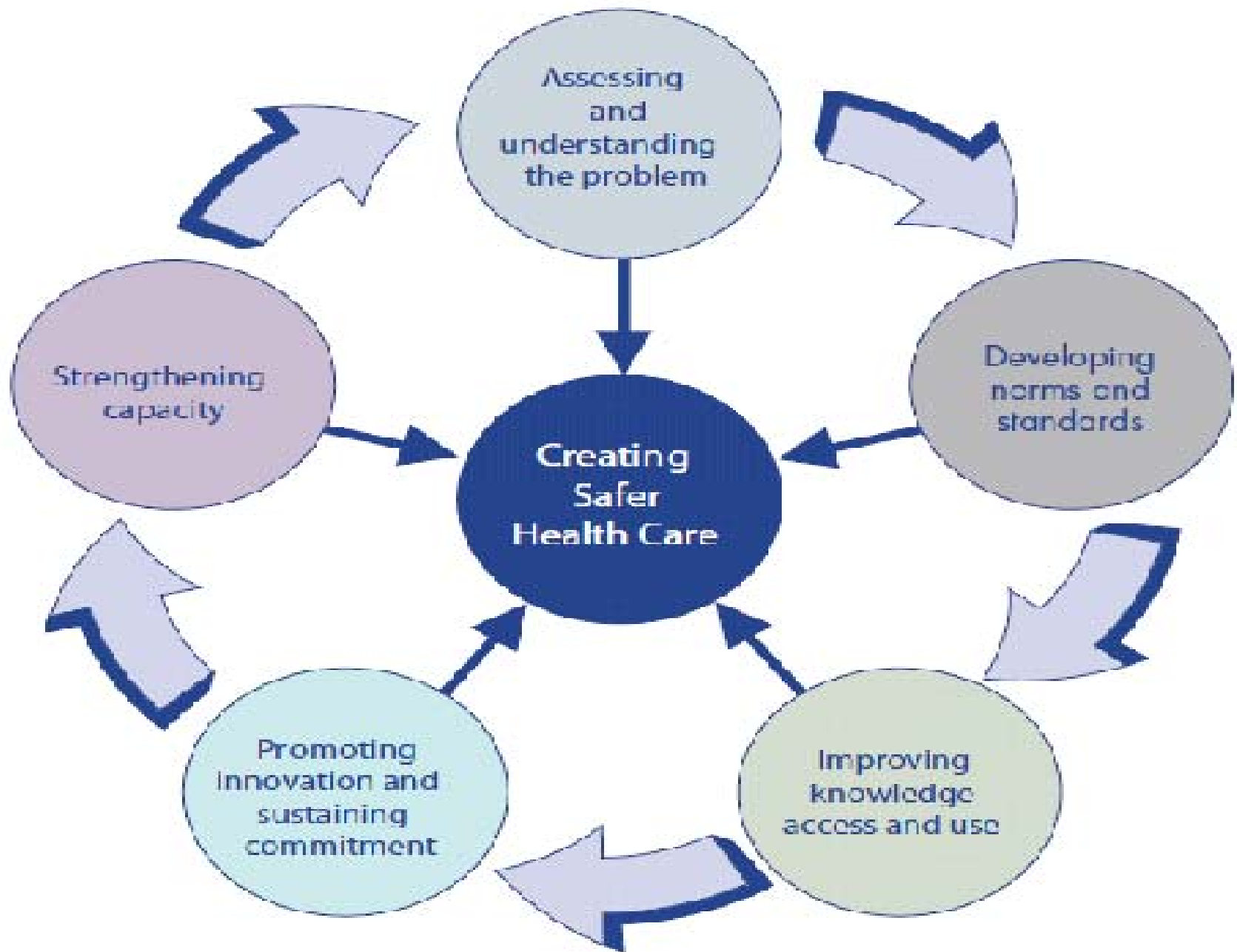
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Confluence of ICHA and WHO-Patient Safety

- Other Partners - Overseas
 - NPSA UK
 - NHS
 - USA
 - CMA
- Other Partners – Domestic
 - Associations
 - Institutions – MAMC, AIIMS, IIPH – PHFI, ICOG, ESI, Railways, Delhi Govt. MCD, Medical Colleges, Professional Councils



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Strengthening Capacity for Patient Safety Worldwide

- Education for Safer Care (AA11)
- Knowledge Management (AA9)



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Checklists/ Algorithms/ Guidelines

- Not regulatory or official/ statutory/ policy – ease of adaptability
- Practical – easy to use tools by practitioners (developed by them)
- 3 Principles for successful implementation - PROFOUND EFFECT
 - Simplicity
 - Wide applicability
 - Measurability

An exhaustive list would create

- Package of improved safety
- But also create Complexity
- Resistance
- Difficult to communicate



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Methodology

	SENIOR LEADERS	TEAM LEADERS	STAFF LEADERS
ENGAGE	How does this make the world a better place?		
EDUCATE	What do we need to know?		
EXECUTE	<ul style="list-style-type: none">• What do we need to do?• What are the barriers to doing it?• How can we do it with our resources and culture?		
EVALUATE	How do we know we improved safety?		



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What is safety culture?



**The way things
are done around
here....when no
one is looking!**

Stuart Matthews



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Pillars of Safety Culture

- **Psychological safety:** People know their concerns will be openly received and treated with respect.
- **Active leadership:** Leaders actively create an environment where all staff are comfortable expressing their concerns.
- **Transparency:** Patient safety problems aren't swept under the rug. Team members have a high degree of confidence that the organization will learn from problems and use them to improve the system.
- **Fairness:** People know they will not be punished or blamed for system-based errors.



FAIRNESS ALGORITHM

1. Did the individuals intend to cause harm?
2. Did they come to work drunk or impaired?
3. Did they do something they knew was unsafe?
4. Could two or three peers have made the same mistake in similar circumstances?
5. Do these individuals have a history of involvement in similar events?



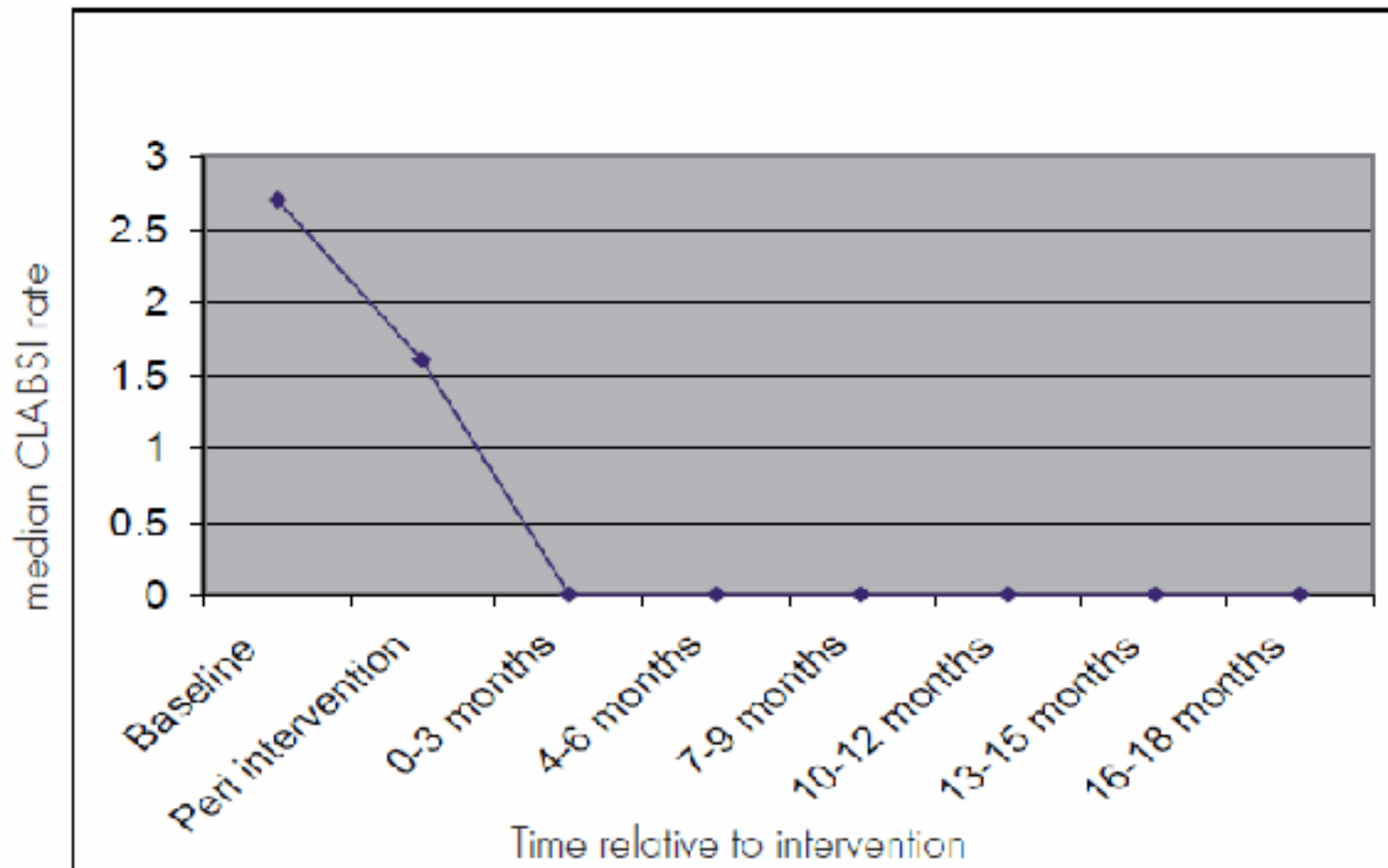


Figure 1: CLABSI improvement

Note: The multilevel Poisson regression model demonstrated a 66% reduction in the incidence rate ratio of CLABSI.



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“Clean Care is Safer Care”

Beyond Hand Hygiene

Promote cleaner care practices in the broadest sense

- Clean equipment (Injection & immunization safety)
- Clean procedures (Emergency and surgical procedures)
- Clean products (Blood transfusion safety)
- Clean environment (Safe water and sanitation)



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“Safe Surgery Saves Lives”

Traumatic injuries and surgical procedures rising:

- 63 million trauma cases
- 31 million malignancies
- 10 million obstetric complications
- Surgery rates \approx Child birth rates
- 234 million major operations worldwide each year
- Complex health services and costliest

Safe Surgery is a Public Health Priority

SAFE SURGERY SAVES LIVES



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What ICHA has done

- Multi location events – Grand Convention – Publication
- ICHA CHAMPIONS – “League of Champions”
- Action areas – WHO Medical Curriculum
- 2 day programs in Medical Colleges
- Physical Collaborative Centers – SGPGI, MAIDS already others in process.
- Scholarship programs e.g. CW and others
- Best Practices Implementation



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Patient Safety Programs

Date	Location	City	No. of Participants
April 19, 09	KEM College & Hospital	Mumbai	84
May 10, 09	Gandhi Medical College & SZH	Bhopal	135
May 23, 09	Fortis hospital	Jaipur	85
May 24, 09	IMA Jalandhar branch	Jalandhar	350
May 31, 09	Nizams Institute of Medical Sciences	Hyderabad	175
June 06, 09	Calcutta Medical Research Institute	Kolkata	148
July 08, 09	Rajendra Institute of Medical Sciences	Ranchi	280
July 27, 09	API Bhavan	Bangalore	320
August 18, 09	SGPGI of Medical Sciences	Lucknow	170
August 28, 09	Christian Medical College	Vellore	70
August 29, 09	Sri Ramachandra Medical College	Chennai	265
November 27-29, 09	ICHA PT SAFETY CONVENTION	New Delhi	350
Ongoing	Collaborative Centres / Medical College Programs	SGPGI / MAIDS	



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*Knowing is not enough; we must apply.
Willing is not enough; we must do.*

Goethe

*A small body of determined spirits fired by
an unquenchable faith in their mission can
alter the course of history.*

Mahatma Gandhi



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Let us Join! For our own sake.
THANK YOU



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