

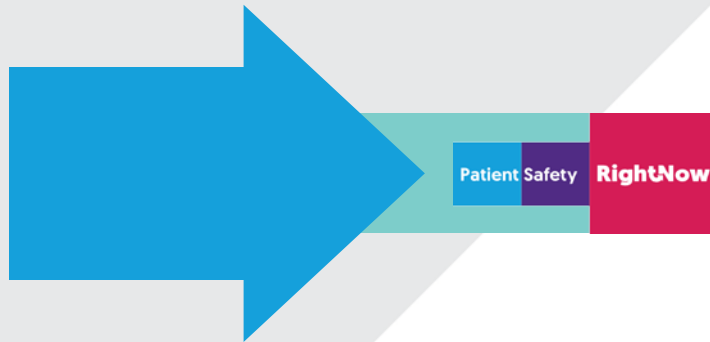
Canadian Patient Safety Institute



PATIENT SAFETY
FORWARD WITH

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Patient Safety Improvement Lead



Canadian Patient Safety Week

Oct 30 – Nov 03, 2017

Welcome to **asklistentalk.ca** –
your home for Canadian
Patient Safety Week!
Mark your calendars and
register today!

Canadian Patient Safety Week
2017 will be held October
30th – November 3rd, 2017
and registration is now open!



The Case for Investing in Patient Safety in Canada - CPSI

- Every 18 minutes there is a death resulting from a Patient Safety Incident in (acute/home care combined). Ranked third behind cancer and heart disease with just under 28,000 deaths across Canada (in 2013).
- Over the next 30 years in Canada, within acute and home care settings, there could be roughly 400,000 average annual cases of patient safety incidents (PSIs), costing around \$6,800 per patient and generating an additional \$2.75 billion (2017\$) in healthcare treatment costs per year.
- This will result in a death every 13 minutes and 14 seconds.

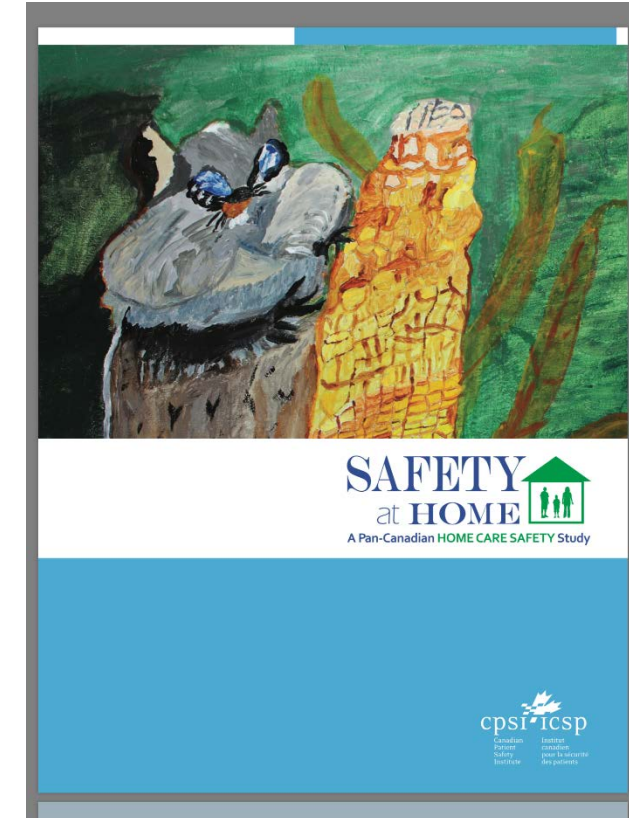


Canadian Patient Safety Institute

- 2003 Baker and Norton (Adverse Events Study)
- 2005 – Formation of CPSI
- 2013 Doran and Blais et al Home Care Safety Study
 - Multiple Partners
 - Incidence of Harm
 - Background papers for patients, policy makers
- 2013 CPSI identifies Home Care as 1 of 4 strategic priorities
- 2014 CHCA Expert Roundtable
- 2014 CPSI / CHCA Winnipeg Roundtable – Integrated Action Plan
- 2016 Dr. Andrew Costa – Home Care clients transitions from ED to Home – To be published soon
- 2017 Dr. Chantal Backman - Safe and effective person-and-family-centered care practices during transitions between hospital-based care and home care. Project completion March 2018.

Safety at Home – Home Care Study

- Annual incidence rate of 10.1% (95%, CI 8.4% - 11.8%)
- 56% of AEs were judged to be preventable,
- 91.4% were associated with an increased use of healthcare resources, 68.8% with disability, and 7.5% with the death of the client.
- Main types of AEs identified from both chart review and secondary databases were falls, medication- related incidents and infections.
- Infections were the most common of the AEs that occurred during the first 30 days of referral to HC.



Home Care Safety Study

https://youtu.be/_yXge5NjJWA

Integrated Patient Safety Action Plan – Timeline

3 Consortium meetings, 3 summits, 2 roundtable meetings have been completed to date.



Diverse organizations participated in meetings including professional associations, quality councils, provincial ministries, health care organizations, and patients' groups.

Action on 4 Themes

1. Communication – System Level
- 2. Client's Right to live at Risk and Partnering with Clients and Families**
3. Advance Knowledge Of Measurement For Improvement
4. Leading Practices in Medication Safety, Falls Prevention, and Infection Prevention and Control.

How To Create Safer Care?

- Lessons of the last 10 years that “AM I Safe” is striving to improve.
 - Improving safety is more complex than simply identifying effective interventions and spreading the word to providers.
 - Efforts to create safer care need to be broader than identification of “what works”. Need to know “How”.
 - Requires a broader “Sensitivity to Operations” and “Anticipation and Preparedness” (Charles Vincent)
 - attentive to patterns and problems of work on the front line
 - cultivate “situational awareness” that allows front line workers to make adjustment to prevent errors from leading to events
 - Shift from reporting to learning from incidents, from counting events to a search for patterns in these events, from looking backward at events to anticipating future risks and shifting from a focus on error to a focus on complexity (Woods and Cook, 2001)

PATIENT SAFETY IN THE HOME

Supporting difficult conversations

Am I Safe?



Phase I (2015-2016)

Objective: To guide safety conversations between health care providers and patients when receiving home care services.

What we did: Pan-Canadian scan of existing safety conversations tools/resources

What we learned:

- Client risk assessment are routinely made
- Profound lack of awareness, availability and utilization of tools to support risk conversations



Phase II (2016-2017)

- Focused on supporting 'Difficult Conversations'
- **Development of customized conversation guides for:**
 - Regulated Health Care Professionals
 - Unregulated Health Care Professionals
 - Patients and families



As a result:

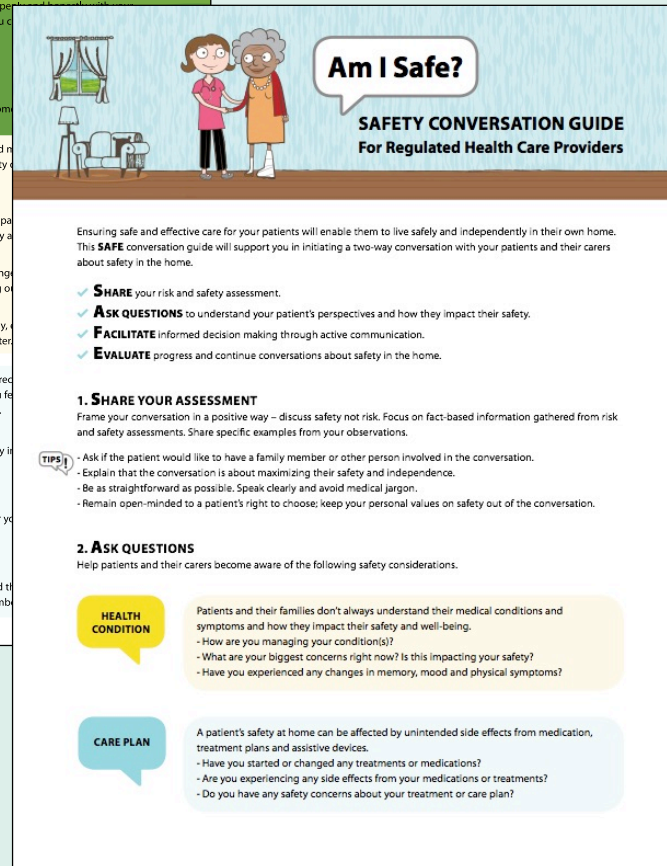
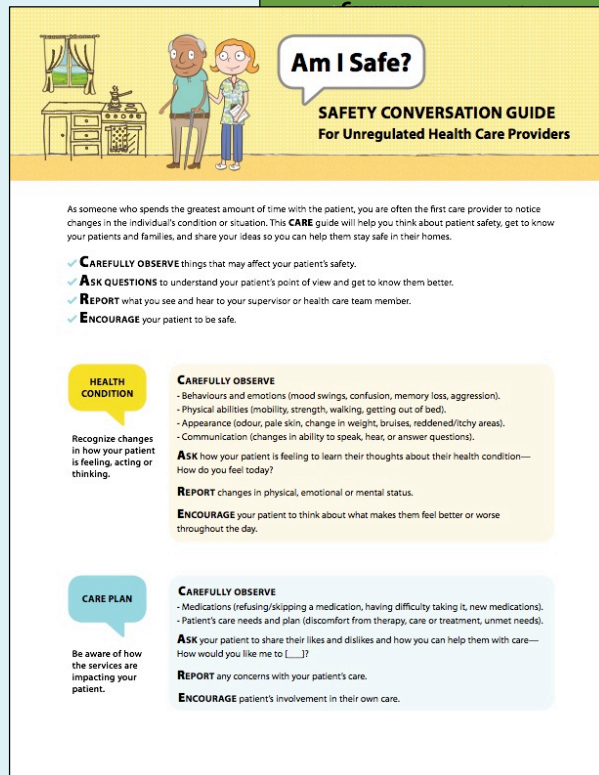
- Patients and carers will engage providers in difficult conversation
- Patients and carers take greater action to be safe
- Providers will be more confident and feel supported



How are we doing this?

- Safety Advisory Group
- Environmental Scan
- Key Informant Surveys and Interviews
- Assessment of Potential Resources





Common elements:

- Reframe the conversation :

~~RISK~~ SAFETY ✓

- Built on existing practices
- Four safety elements:
 - ✓ Health Condition
 - ✓ Care Plan
 - ✓ Lifestyle Choices
 - ✓ Environmental Considerations



Ensuring safe and effective care for your patients will enable them to live safely and independently in their own home. This **SAFE** conversation guide will support you in initiating a two-way conversation with your patients and their carers about safety in the home.

- ✓ **SHARE** your risk and safety assessment.
- ✓ **ASK QUESTIONS** to understand your patient's perspectives and how they impact their safety.
- ✓ **FACILITATE** informed decision making through active communication.
- ✓ **EVALUATE** progress and continue conversations about safety in the home.

1. SHARE YOUR ASSESSMENT

Frame your conversation in a positive way – discuss safety not risk. Focus on fact-based information gathered from risk and safety assessments. Share specific examples from your observations.

- TIPS!**
- Ask if the patient would like to have a family member or other person involved in the conversation.
 - Explain that the conversation is about maximizing their safety and independence.
 - Be as straightforward as possible. Speak clearly and avoid medical jargon.
 - Remain open-minded to a patient's right to choose; keep your personal values on safety out of the conversation.

2. ASK QUESTIONS

Help patients and their carers become aware of the following safety considerations.

HEALTH CONDITION

Patients and their families don't always understand their medical conditions and symptoms and how they impact their safety and well-being.

- How are you managing your condition(s)?
- What are your biggest concerns right now? Is this impacting your safety?
- Have you experienced any changes in memory, mood and physical symptoms?

CARE PLAN

A patient's safety at home can be affected by unintended side effects from medication, treatment plans and assistive devices.

- Have you started or changed any treatments or medications?
- Are you experiencing any side effects from your medications or treatments?
- Do you have any safety concerns about your treatment or care plan?

LIFESTYLE CHOICES

Lifestyle choices including tobacco use, alcohol consumption, physical activities, and eating habits all impact a person's safety.

- Are you experiencing any limitations that concern you?
- What are some of the things you do to stay active and healthy?
- Are you interested in learning about your [nutrition need]/[physical activities]?

PHYSICAL ENVIRONMENT

Have an open discussion on how to make the home safe.

- Is there anything that has been getting in your way of doing things?
- Do you have any safety concerns right now?
- Could anything be changed to make your home safer?

- TIPS!**
- Encourage conversation by using prompts such as nodding, saying "Go on" or "I'd like to hear more about that".
 - Expect emotions and acknowledge them with supportive statements, such as "It seems like this conversation is difficult for you. Can you tell me what is making it difficult?"
 - Repeat back to what you've been told in your own words to ensure a clear understanding.
 - Gauge your patient's readiness—and willingness to have a safety conversation.

3. FACILITATE INFORMED DECISION MAKING

Make sure your patient has enough information to answer the question "Am I Safe?".

- TIPS!**
- Use the teach-back technique to check for understanding – "To make sure I've explained things well, tell me how you understand your situation."
 - Pose friendly questions: "There are different ways that people can make their life easier and safer at home. Can we spend a few moments talking about what is important to you so that we can plan your care together?"
 - Provide written information about safety concerns and encourage your patient to share with their family members.

4. EVALUATE PROGRESS

Always ask yourself "Is my patient safe?" and "Can my patient be safer?" Safety conversations need to happen often. Provide opportunities to continue the conversation in follow-up appointments or calls.

- TIPS!**
- Document and share your actions and observations in the care plan.
 - Encourage all team members, including patients, to voice their concern if they sense or become aware of a safety risk. Use assertive statements to communicate safety risks outlined by "CUS":
- I am **Concerned**
I am **Uncomfortable**
This is a **Safety Issue**



As someone who spends the greatest amount of time with the patient, you are often the first care provider to notice changes in the individual's condition or situation. This **CARE** guide will help you think about patient safety, get to know your patients and families, and share your ideas so you can help them stay safe in their homes.

- ✓ **CAREFULLY OBSERVE** things that may affect your patient's safety.
- ✓ **ASK QUESTIONS** to understand your patient's point of view and get to know them better.
- ✓ **REPORT** what you see and hear to your supervisor or health care team member.
- ✓ **ENCOURAGE** your patient to be safe.

HEALTH CONDITION

Recognize changes
in how your patient
is feeling, acting or
thinking.

CAREFULLY OBSERVE

- Behaviours and emotions (mood swings, confusion, memory loss, aggression).
- Physical abilities (mobility, strength, walking, getting out of bed).
- Appearance (odour, pale skin, change in weight, bruises, reddened/itchy areas).
- Communication (changes in ability to speak, hear, or answer questions).

ASK how your patient is feeling to learn their thoughts about their health condition—
How do you feel today?

REPORT changes in physical, emotional or mental status.

ENCOURAGE your patient to think about what makes them feel better or worse
throughout the day.

CARE PLAN

Be aware of how
the services are
impacting your
patient.

CAREFULLY OBSERVE

- Medications (refusing/skipping a medication, having difficulty taking it, new medications).
- Patient's care needs and plan (discomfort from therapy, care or treatment, unmet needs).

ASK your patient to share their likes and dislikes and how you can help them with care—
How would you like me to []?

REPORT any concerns with your patient's care.

ENCOURAGE patient's involvement in their own care.

LIFESTYLE CHOICES

Pay attention to
your patient's
lifestyle choices,
and how they
impact safety.

CAREFULLY OBSERVE

- Signs of possible abuse (unusual scars, multiple or frequent bruises, inappropriate behaviour).
- Risk-taking behaviors (excessive alcohol intake, illegal drugs, smoking).
- Social support (social activities, loneliness).
- Eating and appetite (types, amount and condition of food).

ASK if your patient is aware of how their lifestyle choices are impacting their safety—
Do you feel safe in your home?

REPORT any unusual things or changes in your patient's daily activities.

ENCOURAGE your patient to have a safe and healthy lifestyle.

PHYSICAL ENVIRONMENT

Watch out for
environmental
factors which can
impact your patient's
safety.

CAREFULLY OBSERVE

- Living conditions (clutter in the house, barriers to mobility, lighting, animals).
- Fire and other potential safety hazards (burn marks in carpets, loose carpets).
- Any changes that could impact safety in the home.

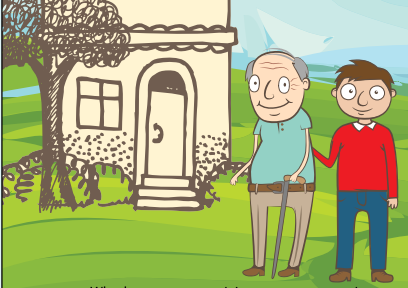
ASK your patient if they feel safe and comfortable in their home - Is there anything you
need to make you safer in your house?

REPORT any concerns with your patient's living environment that may put you or them
in an unsafe situation.

ENCOURAGE your patient to think of ways to make the inside and outside of their home
a safer place and to always be mindful of their safety.



- Talking with your patients, rather than at them, sets a warm tone and builds trust.
- Observing is not just what you see or hear, but also knowing what is 'normal' for the patient.
- Report only the facts - be precise, accurate and provide details or specific examples:
 - Describe the specific situation or behavior; provide concrete data
 - Explain the safety concerns
 - Seek advice
 - Confirm plan



Am I Safe?

SAFETY CONVERSATION GUIDE
For patients/carers

Whether you are receiving care or supporting your loved one, communicating your concerns and being aware of your safety needs are very important. This **ACT** conversation guide will help you in talking openly and honestly with your doctor, nurse or other member of the health care team about safety in the home so you can extend your independence and stay in your home for as long as possible.

- ✓ **ASK QUESTIONS** about how to be safe when receiving care in your home.
- ✓ **COMMUNICATE** your concerns and what is important to YOU.
- ✓ **TAKE CONTROL** by knowing what to do to be safe and avoid accidents in your home.

HEALTH CONDITION

Knowing how your health condition affects your physical and mental abilities can help you take important steps to improving your safety and quality of life.

ASK

- How will my condition affect things at home?
- What are some symptoms I should be aware of that may impact my safety?
- What changes (physical, behavior or emotional) should I pay attention to?

COMMUNICATE

- If you are having problems remembering things or any changes in how you feel.
- Any challenges with your physical abilities (walking, getting out of bed).

TAKE CONTROL
by keeping a record of any changes in how you feel physically, emotionally and mentally: when it happens and how often, what makes it worse or better.

CARE PLAN

You may be taking medications for your health condition or receiving ongoing treatments. It is important to understand how these can impact how you feel and if you are dealing with side effects that may impact your safety and well-being.

ASK

- What side effects could I feel from the medications? Will they impact my safety?
- How are my treatments affecting my physical well-being?
- Who should I call if I'm not feeling well?

COMMUNICATE

- How you feel before and after you take your medications or your treatments.
- If you feel unsteady or have recently fallen.
- If you don't feel "right" or are worried about your safety.

TAKE CONTROL
by keeping a record of your medications and treatments, and the names and phone numbers of your doctor, home care providers and other members of your care team.

LIFESTYLE CHOICES

Being independent and safe means making good choices in how and what you eat, how much exercise you do and whether you drink alcohol or smoke. Alcohol and over-the-counter drugs or herbal remedies can interfere with medicines or cause certain symptoms.

ASK

- What are some tips I can do to manage my condition and stay safe at home?
- Are there any activities that I should do or not do?
- What type of diet should I have?

COMMUNICATE

- Any unexpected changes in your life – things that make you feel stressed or concern you.
- If you are not sleeping well or eating regular meals (breakfast, lunch, dinner).
- How you spend your day – what activities you do.

TAKE CONTROL
by staying active and keeping in touch with friends and family. Keep an open mind and try different things – find out what makes you feel safe and happy.

PHYSICAL ENVIRONMENT

Sometimes you have to make changes to your home to make it easier for you to carry out your daily activities, prevent accidents, and be safe. Installing grab bars in the bathroom, and easy to use handles, moving furniture, using brighter lighting or clearing space are all ways to help you stay safe.

ASK

- What do I need to do to make my home safe?
- Where do I get the things I need?

COMMUNICATE

- If you are having problems walking, bathing or getting around your house.
- How often are you taking walks outside your house – how far are you going?
- Is it becoming difficult to open your cupboards, turn on your facets or do other things around your house.

TAKE CONTROL
by routinely assessing your own needs and inspecting your home for any potential home safety issue.

TIPS

Don't be afraid to clarify to make sure you understand what is being explained to you. Ask the person to write down his or her instructions for you.

HELPFUL PHRASES:

"Can you please explain that to me again" or
"What I am hearing you say is...is this right?"

Canadian Home Care
Association
canadienne de soins
et services à domicile
Advancing Excellence in Home Care

Working together to reduce preventable harm in the home.

cpsi icsp
Canadian
Patient
Safety
Institute Institut
canadien
pour la sécurité
des patients

What's Next?

- Tools adoption and application
- Objective for today's working group!

WORKING GROUP DISCUSSIONS

1. How could your organization use these suite of conversation guides to support care delivery?
2. What enablers or barriers do you see in adopting these guides as part of care practices?

PATIENT SAFETY IN THE HOME

Supporting difficult conversations

Am I Safe?



Is your organization interested in implementing the conversation guides?

✉ Contact Catherine Suridjan to learn more csuridjan@cdnhomecare.ca

Thank You