Medical education & Patient safety

No head or tail and loose & win.

It must be win–win!

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Professional attributes

• Dexterity
• Communication
• Judgment
• Patient safety
Definition

**Patient Safety**

“The freedom from accidental injury due to medical care or from medical error”  
*(Institute of Medicine 2000)*

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So much talked about it!
Google search

Results about 522,000 for quality assurance and patient safety. (0.21 seconds)

- Commission on Patient Safety and Quality Assurance
- The Commission on Patient Safety and Quality Assurance was established on the 16th January 2007 by the Minister for Health and Children, Mary Harney T.D. ... www.cpsqa.ie/- Cached - Similar
- Commission on Patient Safety and Quality Assurance established by ...
- Swope Health Services - Quality Assurance & Patient Safety
- Quality Assurance and Patient Safety. Quality Compliance Department; Services Provided; Clinical Quality; Performance Improvement ... www.swopehealth.org/Clinics/Quality_Assurance_Safety.aspx - Cached
- Improving Patient Safety Through Quality Assurance | Archives of ...
- Improving Patient Safety Through Quality Assurance from Archives of Pathology & Laboratory Medicine provided by Find Articles at BNET. findarticles.com/p/articles/mi_qa3725/is.../ai_n17180955/ - Cached - Similar

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To err is human
But don’t make it a habit!
Patient safety in undergraduate curriculum - medical students’ perception

Gilberto Ka Kit Leung, N.G. Patil

- Medical students in Hong Kong are aware of medical errors being an inevitable barrier between what is considered as ‘best care’ and what is being actually provided.
- There was, however, a lack of appreciation of the multi-factorial mechanism underlying the occurrence of errors, and the importance of a trans-disciplinary approach to constructive management of errors.
- A knowledge gap was found to exist.
- A formal curriculum on patient safety to bring about and sustain this change in healthcare culture is introduced.
A tale of two patients

A patient had successful laryngoscopy at Day surgery clinic. But, he was booked for cystoscopy!

Procedure was performed with competence.

What happened?

Patient with similar name was to have laryngoscopy. Quality of procedure assured but patient safety ignored.

Solutions
**WHO initiative**

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**Surgical Safety Checklist (First Edition)**

**Before Induction of anesthesia**

- **Sign In**
  - Patient has confirmed:
    - Identity
    - Site
    - Procedure
    - Consent
  - Site checked/Not applicable
  - Anesthesia safety check completed
  - Pulse oximeter on patient and functioning
  - Does patient have an known allergy/ID:
    - Yes

- **Time Out**
  - Confirm all team members have introduced themselves by name and role
  - Surgeon, anesthesiologist professional, and nurse verbally confirm:
    - Patient
    - Site
    - Procedure
  - Autorise critical events
  - Mission defined: What are the critical or unexpected steps, operative duration, anticipated blood loss?
  - Anesthesia team reviewing: Are there any pertinent issues or concerns?
  - Nursing team reviewing: Has sterility established? Does medication conflict exist? Is anesthesia and patient correct?
  - Has adequate IV access and fluids been planned

- **Sign Out**
  - Surgeon verbally confirms the team:
    - The name of the procedure recorded
  - That instrument, sponge, and needle counts are correct (or not applicable)
  - How the specimen is labelled (including patient name)
  - Whether there are any equipment problems to addressed
  - Surgeon, anesthesiologist professional, and nurse review the key concerns for recovery and management of this patient

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This checklist is not intended to be comprehensive. Additions and modifications to fit local practices are encouraged.
Implementation of the checklist was associated with concomitant reductions in the rates of death and complications who were undergoing noncardiac surgery in a diverse group of hospitals

Warning: Checklist may become ‘tick list’.
Recommended topics

1: What is patient safety?
2: What is human factors and why is it important to patient safety?
3: Understanding systems and the impact of complexity on patient care
4: Being an effective team player
5: Understanding and learning from errors
6: Understanding and managing clinical risk
7: Introduction to quality improvement methods
8: Engaging with patients and carers
9: Minimizing infection through improved infection control
10: Patient safety and invasive procedures
11: Improving medication safety
12. Case studies

3 Important Ps related to patient safety

- Prescription
- Procedures
- Performance
Teaching & Learning

- Case studies (Seminars, PBL, CBL)
- Simulation
- Videos
- M&M
- Special Study Modules
- Workshops
- Time out
- Assessments

New MRCS exam
OSCE stations

- Anatomy and surgical pathology
- Surgical skills and patient safety
- Communication skills
- Applied surgical science and critical care
- Clinical skills

Royal College of Surgeons Edinburgh
To conclude,

Cultivate culture of patient safety in medical education by CPR

- Consciously
- Practice and
- Report
Thank You  Gracias  感謝  dhanyavaad  Danke  Grazie  Merci  ありがとうございます