

Towards a global and integrated patient safety policy: Principles and recommendations

Summary

Patient safety is a major issue, now well perceived by patients and users but also by healthcare professionals. Patients and users perceive a lack of information on this subject, in particular when they are victims of an adverse event. There is no global and integrated policy today covering patient safety with respect to healthcare. The clarity of recent efforts on this subject is strongly jeopardized by compartmentalized "organ-pipe" and sectorized systems, mostly set up as reactions to sanitary crises. Although progress has been made for anesthesia and infection associated risks, epidemiological surveys conducted over the past decade on all adverse events (ENEIS) and on adverse drug events such as those associated with anticoagulants (surveys by the National Agency ANSM in relationship with the regional pharmacovigilance centers) have shown that the overall situation is not improving despite efforts mainly focusing on hospitals.

The High Council for Public Health (Haut Conseil de la santé publique) considers that a global policy integrating an overall response for all healthcare-related risks is currently necessary. This policy should continue and reinforce approaches set up in hospitals and now drive them forward in primary care and in the medico-social sector; it should confirm regional governance by Regional Health Agencies (ARS) but also focus on local responses by medical professionals and structures, following the principle of subsidiarity. The pre-eminence of systemic factors as main contributors to healthcare-related risks (coordination, communication, etc.) should be recognized and a visible commitment made by all stakeholders - healthcare professionals, managers and users - should be obtained. This general and integrated policy would allow France to fall into line with policies conducted in the most advanced countries: it involves profound transformation of the culture of all healthcare stakeholders.

This report analyzes the situation of France and of advanced countries. It proposes two founding principles and makes five recommendations :

[1] The drafting of a bill to assert the values and principles and change the current blame-culture; this high-level regulatory text would define national steering, annual monitoring by parliamentary bodies, coordination of stakeholders (by separating policy-makers and inspection-control bodies from support structures for quality improvement), the assessment and means required, thus completing the "Hôpital, Patients, Santé, Territoires" (Hospital, Patient, Healthcare, Territories) Act.

[2] Coordinated, integrated and graduated organization of risk management, with security efforts taken as close as possible to healthcare organizations, their care pathway within local territories, and steered by ARS.

[3] Patient safety should be better anchored in healthcare organization, by stimulating professionals' commitment including decision-makers and managers at all levels. This anchorage means stating the links between safety and healthcare financing and requires transparency involving information systems that are themselves safe, ergonomic and validated. Reporting systems should be consistent with each other but cannot be the only source of safety information. Coordination of care, in particular by the general physician, favors consistent care pathways, facilitates access and continuity of care, avoids duplicates and inefficient interventions therefore risks and excess costs, and allows identification of adverse events. A treatment funding reform, moving towards an all-in sum logic, with contracting systems, could allow better prevention of healthcare-related risks.

[4] More importance should be given to patients in the safety of their own care, in particular through therapeutic education as well as to users who could give their opinion on patient safety at all levels in the healthcare system. [5] The training in patient safety of carers, which is insufficient although key for raising the safety culture, and patient safety research, which is under-developed when compared with neighboring countries, need to be amplified.

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