

Introduction to Work in TF I-III

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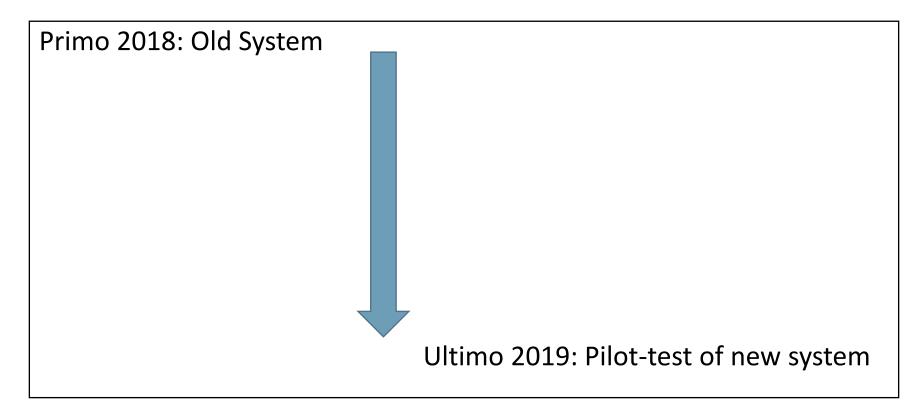
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The Inception Report

The Road Map for SenSys





The New System

A new web-based system for reporting and learning from sentinel and other adverse events (patient safety incidents) connecting all the hospitals and the central levels in a national patient safety culture.

The new Slovenian SenSys will be modeled on the Danish SenSys, distinguished by its high compliance and effective organisation but with the reform processes currently being run on the system to revitalise it in Denmark built-in from the get-go. This will provide Slovenia with a state of the art reporting and learning systems.



The Main Principles

That must always be remembered when carrying out work in TF i-III

Reporters are protected

a sanction-free system/a learning system/not a system for securing evidence in disciplinary or criminal cases/not a whistleblowing system



The Main Principles

That must always be remembered when carrying out work in TF i-III

The principle of closeness

a short feedback loop to the reporter must be secured. Number of reports relies on the understanding that 95 % of learning must take place where the incidents occur, at the local level. Reporters should be acknowledged, met with information about reported patient safety incidents and experience that reporting leads to positive changes and improvements in their clinical work.



Recommendations for the New Slovenian SenSys

From the inception report

- 1. Everything must be reported
- 2. All licensed health professionals must have a legal duty to report
- 3. Every report must be submitted to the national SenSys
- 4. Reports must be marked with both actual damage and potential damage for the benefit of identifying near-misses
- 5. Reports with low actual damage and low potential damage may be reported in a short form
- 6. Description of learning measures should be voluntary
- 7. Reporting duty and legislation must leave room for development of the SenSys
- 8. No possibilities in the legislation for sanctions against reporters not reporting but mild measures against local managements for abusing or neglecting patient safety incident reports/reporting.



What Must We Have Completed by the End of the Project (ultimo 2019)?

Tasks I-III Corresponding to Task Force I-III

TI: concrete wording for legislation, coordinated with other relevant legislation in Slovenia;

TII: IT system is procured, administrative resources secured;

TIII: guidelines for reporting, case-handling and learning are prepared and have been published/distributed to stakeholders



Task Forces I-III

The three task forces will meet and carry out group work at workshop I-IV in iterative processes. This serves different purposes: 1) achieving the goals of the tasks and 2) increasing expertise in the task forces and facilitating knowledge sharing across the OWG.



Task Force Group Work Today

Guidelines for a Productive Group Proces

Are you in the Task Force you can contribute the most to?

Take a moment to describe to yourself where your task force can draw on your skillset(s).

We will in the construction of the system itself honour the principle that every perspective has value and shall be taken into consideration.

Move on from problems. Accept that not everything can be solved in the workshop today. Try putting a piece of paper in the middle of table. If discussions of a problem are dragging out and momentum is lost, write down the problem on the paper and move on to other subjects.



Task Force I

Workshop I

Task force will decide on a proposal for the intentions and main principles of the law (purpose of system (learning), freedom from sanctions (universal or to a degree) etc.). The product of the workshop will be a document giving an overview of necessary paragraphs and their functions that the legislation must contain.

After workshop I, dependencies and connections to other relevant legislation must be mapped out. Review process for overview document could be carried out via email within the task force.



Task Force II

Workshop I

The task force will draft elements of reporting form and outline a reporting form based on ICPS but adjusted to Slovenian conditions (ICPS-SI) with a marking of MIM-PS data fields for short form reporting.

After workshop I, there will be a draft and review process regarding the reporting form. The MoH will prepare specifications of requirements for the technical platform.



Task Force IIII

Workshop III

Task force members will present local cases of best practice and approaches to patient safety culture to identify elements to preserve and cultivate in the implementation of the SenSys. TF will describe in detail what is to be expected from the different roles of the system (local/national).

After workshop I, there will be a review process of the documents drafted in workshop I.

