Implementing a Patient Safety Champion Program to Engage Leaders in Promoting a Culture of Safety

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Aim:

Increase participant's knowledge of safety principles and tools and departmental safety event reporting through implementation of a patient safety champion program.

Background:

The use of patient safety champions/coaches to engage in education, advocacy, and relationship building with the ultimate goal of implementing patient safety practice change has been identified as a best practice to influence safety at the frontline. Research evidence on the use of patient safety champions to advocate for patient safety at the microsystem level and disseminate shared learnings on safety and action plans has shown it to be impactful on both safety culture and patient outcomes. Prior to this program, there was no standardized patient safety training program for leadership at Rush University Medical Center (RUMC).

Participants:

Participants for the pilot program were managers and directors who had received Just Culture training. Twenty employees participated in the first cohort, representing eleven different departments. The second cohort included twelve employees from seven different departments. Each cohort included employees from clinical and non-clinical areas.

Clinical Departments

- Nursing (multiple units)
- Pharmacy
- Blood Bank
- Dietary
- Transplant surgery & clinic
- Interventional Services

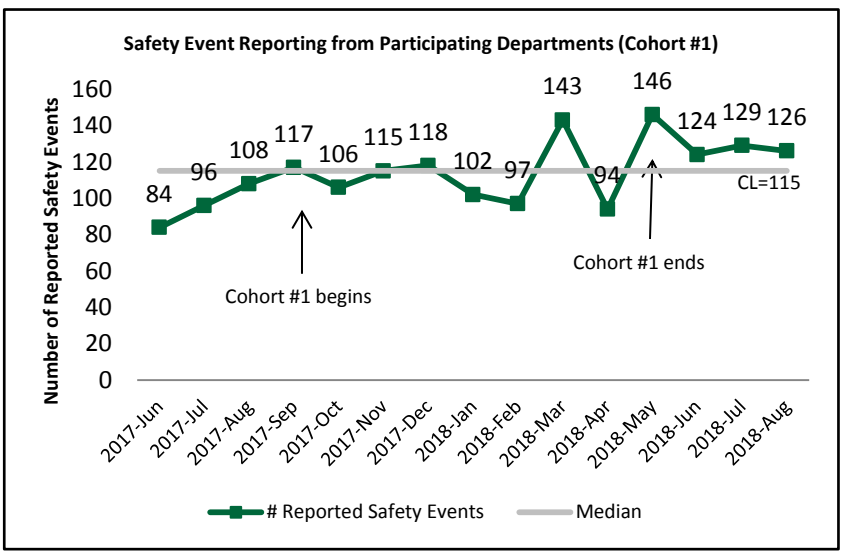
Non-Clinical Departments

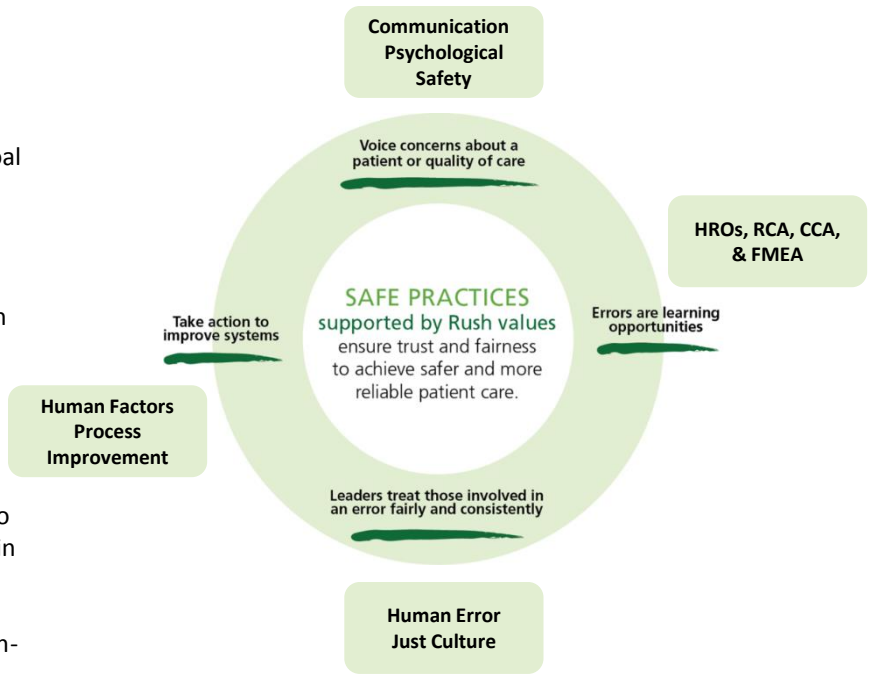
- Security
- Patient Transport
- Medical Center Engineering
- Risk & Claims Management
- Patient Relations

Patient Safety Champion Cohorts 1 & 2		
Participant's Department	**Number of Participants**	**Total Percentage**
Clinical	18	56%
Non-Clinical	14	44%
Total	32	

Results:

- Participants reported via surveys that the most useful sessions to promote a culture of safety were:
  - Psychological safety
  - Communication
  - High reliability concepts
- 93% of participants (n=27) perceived they were better able to integrate care with other teams to ensure continuous, reliable patient care
- Number of reported safety events from participating departments shows movement toward more reporting; further monitoring is needed to determine sustained changes





Program Design:

The Rush Model of Safety Culture (above) served as the conceptual framework for the Patient Safety Champion program. Just Culture had been introduced two years earlier and laid the groundwork for a comprehensive safety program. The content for the Patient Safety Champion program was developed to address each element of the Rush Model of Safety Culture as well as from requests for additional training made following Just Culture implementation.

The pilot program was initially structured as eight one-hour sessions over the course of nine months with each session focused on a different aspect of patient safety. The sessions were designed to include theoretical safety concepts and teach participants strategies and tools to apply these concepts in their daily work.

Based on feedback from cohort #1 participants, the training program's structure was adapted to four two-hour sessions. The content was unchanged for cohort #2. Interested cohort #1 participants, including nurses and physicians, co-led the second cohort. Participants were nominated by those in the first cohort and others who had expressed interest in learning more through working on various organizational safety improvement projects were invited to participate in the second cohort.

Session Topics	Safety Tools/Strategies
Human Error	STAR
Psychological Safety	Peer checking, Peer coaching, CUS
Communication	Read-back, Clarifying questions, Phonetic/Numeric clarification
High Reliability	Debriefs
Investigation Techniques (2 sessions)	Process mapping, 5-Whys, Fishbone diagrams, Cause mapping
Human Factors Engineering	Checklists, Action plan hierarchy
Process Improvement	Aim statements, Run/control charts, PDSA

Next Steps:

A plan for expanding and sustaining this program received organizational support from senior leadership. Based on participant input and leadership recommendation, the format will be one four-hour session open to all leaders at the manager level and above. After leadership completes the program, it will be opened to frontline staff as well. Participants from the first two cohorts will be included to assist with facilitating future sessions.

Success of this program is due in part to the foundation for culture change laid through Just Culture adoption as well as organization leadership support.

References:

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