



Creating a Culture of Safety

Objectives

Upon completion of this training, you will be able to:

- ◆ Define a culture of safety.
- ◆ Describe our current safety culture and the need for change
- ◆ Describe the essential principles and core elements of a safety culture
- ◆ Discuss cultural transformation

Investigations of these catastrophic accidents found they all had one thing in common



Failed Safety Culture

- ◆ Could have been prevented/Did not have to happen
- ◆ Overall safety culture had serious deficiencies
- ◆ Lacked a reporting and learning culture
- ◆ Misguided perception that safety standards have to be relaxed in order to meet financial and time constraints
- ◆ Normalization of Deviance

Safety Culture Defined

- ◆ “the set of beliefs, norms, attitudes, roles, and social and technical practices that are concerned with minimizing the exposure of employees, managers, customers and members of the public to conditions considered dangerous or injurious”.
- Turner, B.A., Pidgeon, N., Blockley, D., Toft, B., 1989. Safety culture: its importance in future risk management. Position paper for the Second World Bank Workshop on Safety Control and Risk Management, Karlstad, Sweden.
- ◆ “The way we do things around here”

The Dark Side

I was starting to get close to the root of the problem that has been keeping hospitals in the dark ages and derailing our attempts to improve safety. Hospitals suffer from an antiquated and often toxic culture that creates and supports broken systems that, in turn, harm patients. Without a change in culture we would not be able to improve those systems and patients would continue to be in danger.

- ◆ Peter Provonost, *Safe Patients, Smart Hospitals*

The Bright Side

We can and we are changing this situation. Safety culture is about attitudes and behaviors. As leaders, the safety culture at your Medical Center will flow from your approach to the subject. If you are involved, and are seen to place safety as a high profile issue, you're more likely to influence the attitudes and behaviors of your staff and physicians

Culture Change is Hard Because Culture has Three Layers...

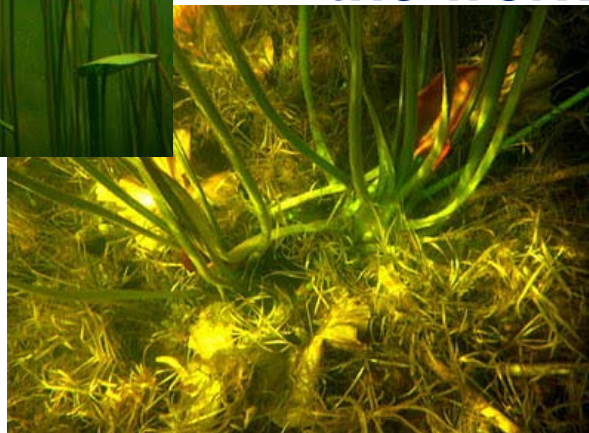


1. Behaviors, norms, processes enacted on the job—Culture Assessments

2. Espoused values, goals, philosophies, formal policies—Debriefings and Questions about how we do the work



3. Underlying assumptions—Observation/ Discussion



The Impact of Culture on Outcomes

What do culture assessments have to do with outcomes?

What Creates a Culture of Teamwork ?

❑ *Teamwork Climate Questions from SAQ*

- ❑ In this unit, it is difficult to speak up if I perceive a problem with patient care
- ❑ Disagreements in the unit are resolved appropriately (i.e., not who is right, but what is best for the patient)
- ❑ It is easy for personnel to ask questions when there is something they don't understand
- ❑ Nurse input is well received in this unit

What Creates a Culture of Safety?

□ *Safety Climate SAQ Questions*

- I would feel safe being treated here as a patient
- Medical errors are handled appropriately in this clinical area
- I receive appropriate feedback about my performance
- I am encouraged by my colleagues to report any patient safety concerns I may have

Safety and Teamwork Culture Also Impacts Staff Safety

- ◆ High risk areas for patients are often high risk areas for staff
- ◆ Staff well-being has an impact on their ability and presence to provide care
- ◆ The desired behavior of “speak up” applies to all safety concerns
- ◆ Environmental factors impact all risks

Areas of Opportunity

- ◆ “The culture in this work setting makes it easy to learn from the errors of others” (Safety Climate)
- ◆ In this work setting, it is difficult to discuss errors (Safety Climate)
- ◆ “In this work setting, it is difficult to speak up if I perceive a problem with patient care” (Teamwork Climate)
- ◆ “Disagreements in this work setting are resolved appropriately (i.e., not who is right, but what is right for the patient)” (Teamwork Climate)
- ◆ “Problem personnel are dealt with constructively by our facility and local management” (Working Conditions)

Safety Culture - Core Elements

- ✓ Mindful
- ✓ Flexible
- ✓ Informed
- ✓ Just"
- ✓ Reporting
- ✓ Learning

♦ James Reason, Engineering a Safety Culture

Culture – The Engine that drives patient safety



Is the Engine in Need of an Overhaul?

- ◆ Just Culture--Trust
- ◆ Reporting Culture--Respect
- ◆ Learning Culture--Improving

Aim

Major Influences

Secondary Influences

**Safest Care for
Every Patient
Every Place
Every Time**

Leaders

**Psychological
Survey**

Respect

Values

**Lead the Learning
System**

Psychological Safety



"Yea, though I walk through the valley of the shadow of death, I will fear no evil" Psalm 23

Psychological Safety

- ◆ Individuals do not want to be perceived as being
 - 1) stupid
 - 2) incompetent
 - 3) negative
 - 4) disruptive

RESPECT—Everyone in the organization can say “yes” to three questions every day

1. I am treated with dignity and respect by everyone I encounter every day.
2. I am given the things I need so that I can make a contribution
3. I am recognized for my contribution

Paul O'Neill--Alcoa

Values

Values are articulated by leaders on a daily basis

Everyone in the organization can state how their work relates to the values of the organization

Psychological Safety

- It is critically important that people feel safe speaking up. Psychological safety has a profound impact on team performance.
- Does it feel safe to speak up ?
- Will I be treated with respect?
- Will they help fix my problem?
- If you don't get the right answers, then it gets risky.

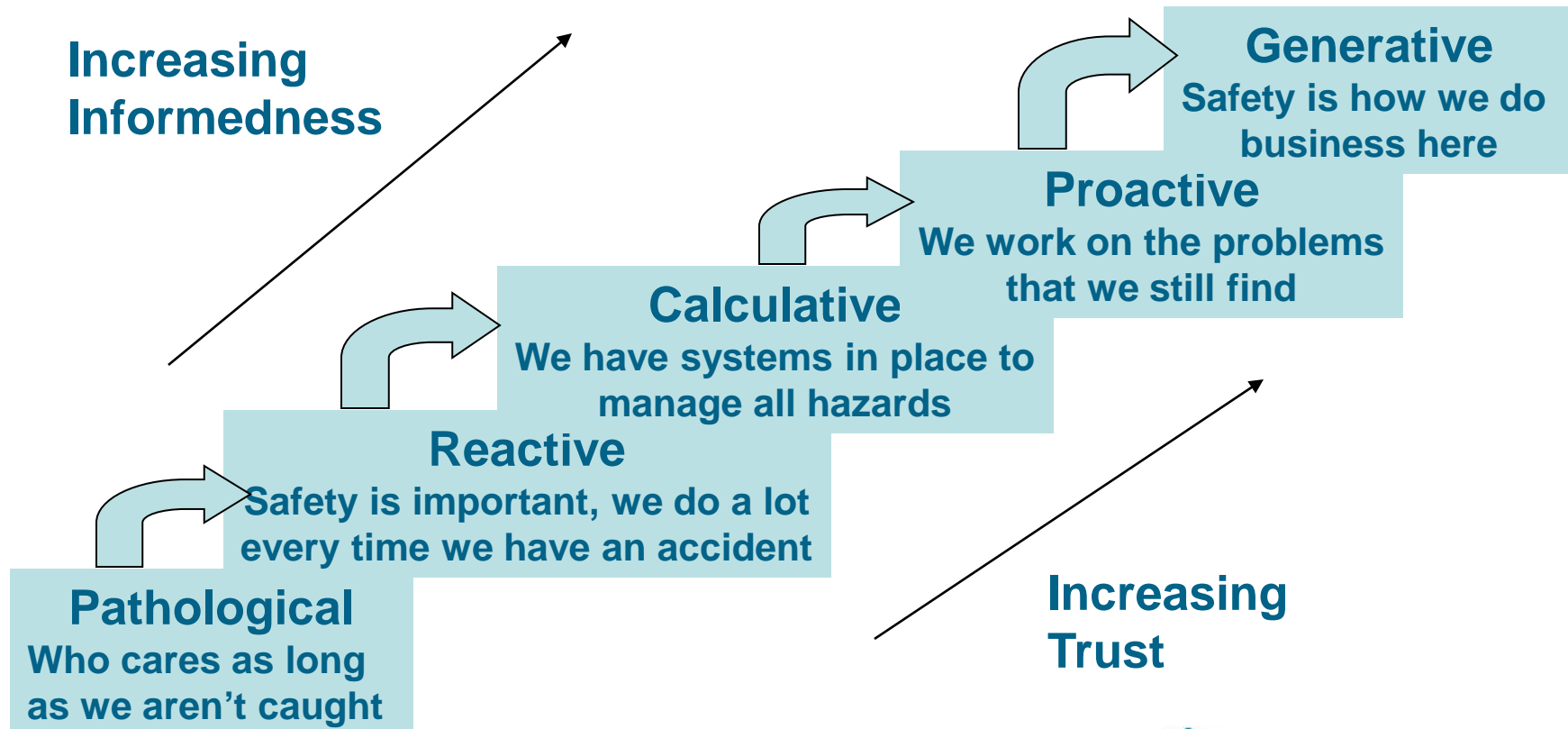
Learning Culture

- ◆ Keys to the Kingdom—cannot exist if you don't know what you don't know.
 - Just Culture
 - Reporting Culture
 - Let staff know you received their report and thank them
 - Do something with the information and let people know what you did
 - SHARE what you learn so that the same safety issue doesn't re-occur

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Evolution of a Safety Culture



What is Patient Safety?

“ The names of the patients whose lives we save can never be known.

Our contribution will be what did *not* happen to them.

And, though they are unknown, we will know that mothers and fathers are at graduations and weddings they would have missed, and that grandchildren will know grandparents they might never have known, and holidays will be taken, and work completed and books read, and symphonies heard, and gardens tended that, without our Work, would never have been.”

*Donald M. Berwick, MD,MPP
President and CEO
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