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International Society for Quality in Health Care

ISQua's Vision

To transform the health of people and the quality and safety of healthcare, through global communities

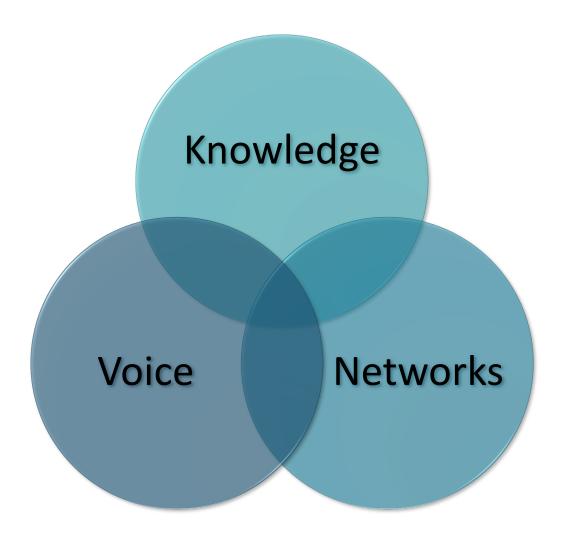
Our Mission

To inspire and empower people to advocate for and to facilitate people's health and improvements in the quality and safety of healthcare worldwide

Our Action

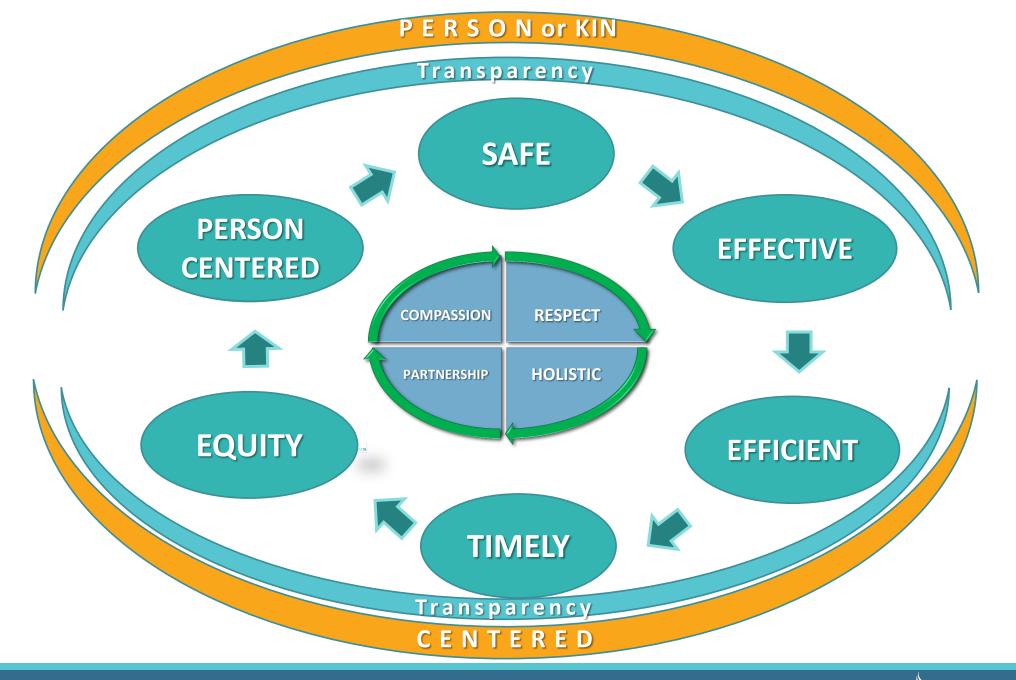
Enabling a global community to transform health through External Evaluation, Knowledge, Network and Voice





Enabling a global community to transform healthcare through External Evaluation, Knowledge, Network and Voice.







Delivering quality health services

A global imperative for universal health coverage











Recommendations

Accountability

Universal Health Care

Systems Thinking

Quality Measurement in HealthCare

Digital Health

Adapt new technological

Informal Care Sector as partners

Prioritise extreme adversity

Address Corruption Culture of Learning

Research

ARRATIVE REVIEW



Transforming concepts in patient safety: a progress report

Tejal K Gandhi, ¹ Gary S Kaplan, ² Lucian Leape, ³ Donald M Berwick, ¹ Susan Edgman-Levitan, ⁴ Amy Edmondson, ⁵ Gregg S Meyer, ⁶ David Michaels, ⁷ Julianne M Morath, ⁸ Charles Vincent, ⁹ Robert Wachter ¹⁰

Institute for Healthcare Improvement, Boston, MA, USA Virginia Mason Health System, Seattle, Washington, USA I Harvard University T H Chan School of Public Health, Boston, Massachusetts, USA I John D Stoeckle Center for

ABSTRACT

In 2009, the National Patient Safety Foundation's Lucian Leape Institute (LLI) published a paper identifying five areas of healthcare that require system-level attention and action to advance patient safety. The authors argued that to Iruly fransform the safety of healthcare, there was a need to address medical education reform; care internation: restorinci lov and meaning in work for system-level action: (1) medical education must be redesigned to prepare new physicians and other health professionals to function in these new cultures; (2) care must be delivered by multidisciplinary teams working in integrated care platforms; (3) healthcare workers need to

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MO. 11 (2018): 1736–1743

C2018 Project HOPE—

The People-to-People Health

By David W. Bates and Hardeep Singh

Two Decades Since To Err Is Human: An Assessment Of Progress And Emerging Priorities In Patient Safety

STILL NOT SAFE



PATIENT SAFETY

AND THE MIDDLE-MANAGING OF

AMERICAN MEDICINE

Robert L. Wears & Kathleen M. Sutcliffe

Highly effective interventions have since been developed and adopted for hospital-acquired infections and medication safety, although the impact of these interventions varies because of their inconsistent implementation and practice.

Progress in addressing other hospital-acquired adverse events has been variable.



Recommendations

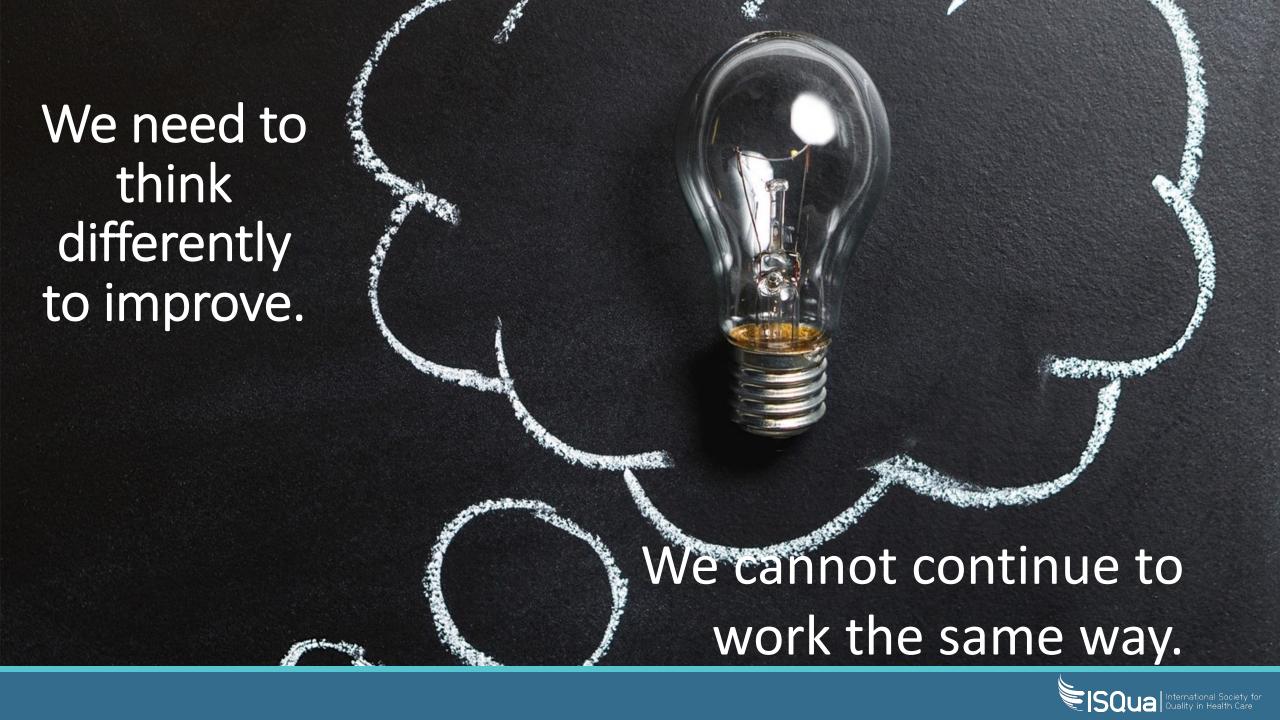
Education for Safety

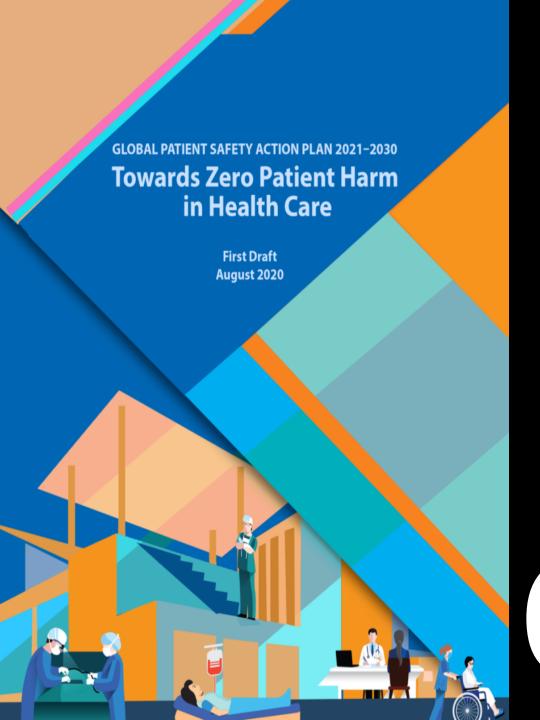
Integration of care

Psychological and physical safety healthcare workers

Patients as partners in coproduction

Transparency





Outcomes

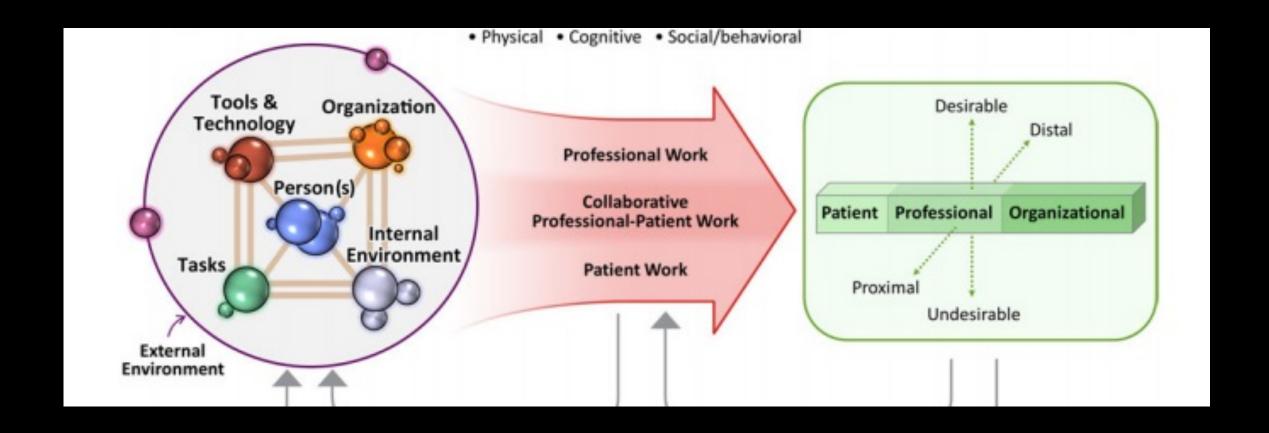
Free from Harm both physical and mental

Power

Culture

Leadership

People



Systems approach

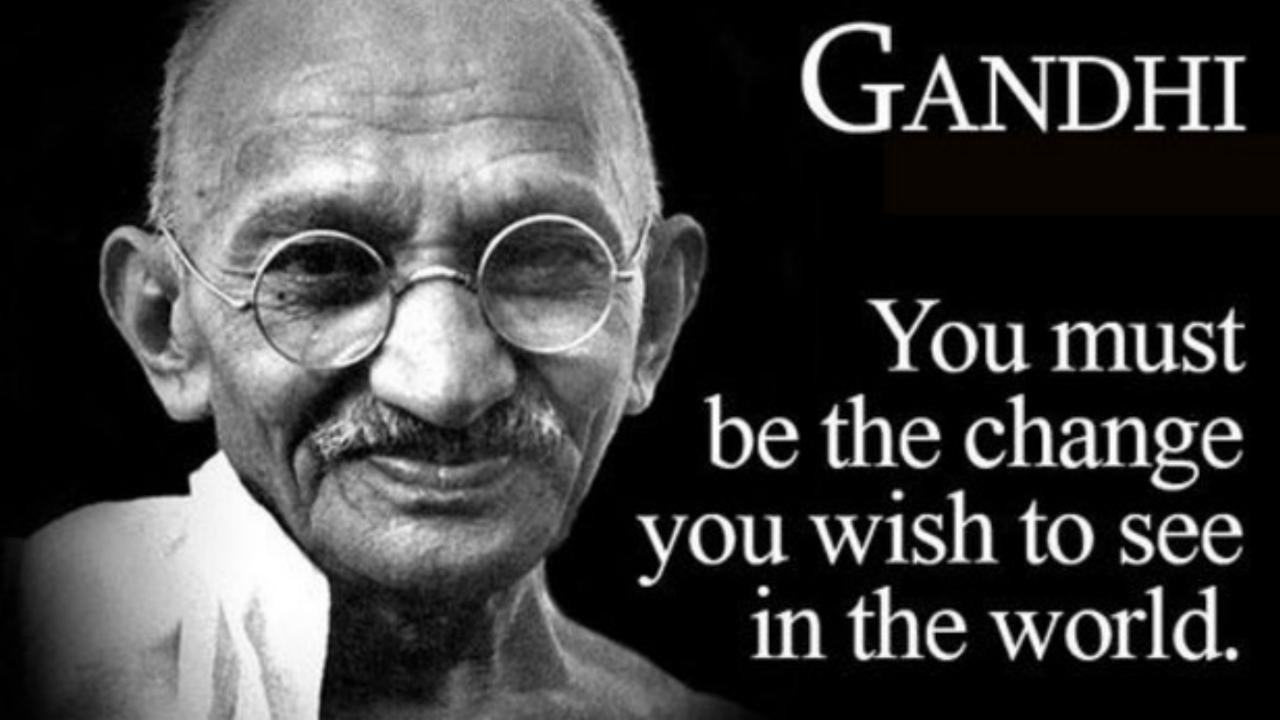
Holden RJ, Carayon P, Gurses AP, et al. SEIPS 2.0: a human factors framework for studying and improving the work of healthcare professionals and patients. *Ergonomics*. 2013;56(11):1669-1686.





Patient Safety is a Public Health issue







https://isqua.org/events/florence.html







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