European Network for Patient Safety & Quality
PaSQ
AGENAS-Roma
June 5th, 2012
J.Bacou
PaSQ will build on the EUNetPaS: network…

An EU-level platform for collaboration and networking between:

- 27 Member States
- International organisations
- European stakeholders in the field of healthcare (healthcare professionals, patients, institutions, scientists)
…of National Networks

- National institutions on Patient Safety (PS):
  - Health care quality agencies
  - Dedicated PS agencies or departments
- Decision makers and financiers
- Healthcare professionals
- Patient representatives
- Research teams on PS
PaSQ a JA in Patient Safety and Quality of Care

Member States Needs

Commission Policies and projects

PS recommendation Draft on Q of Care

Cross Border directive

EUNetPaS Network

National Policies Platforms

International Organisations i.e. WHO, OCDE

Patient Safety and Quality Joint Action

PaSQ: European Union Network for Patient Safety and Quality of Care
A long process and a perfect timing to fit with EC agenda

PaSQ:

Letter from EC to MS to participate to the JA March 2010

- 7 preparatory meetings (2010-2011) mainly organised by the EC

May 2011- April 2012 EAHC evaluation

Starting date April 2012

Kick off meeting May 24-25th 2012 Copenhagen (Danish Presidency of the EU)

Other EC initiatives in the PaSQ field

Implementation of the Patient Safety Recommendation (2010 - 2011)


Review of the European Standardisation regulation (2012)
PaSQ General Objective

The general objective of the PaSQ Joint Action is to support the implementation of the Council Recommendations on patient safety. The JA will strengthen cooperation between EU MS, international organizations and EU stakeholders on issues related to quality of health care, including patient safety and patient involvement.
Citizens’ perception

Half of respondents to EU survey feel they could be harmed while receiving healthcare

Question: QD4a. How likely do you think it is that patients could be harmed by a) hospital care and b) non-hospital care in (OUR COUNTRY)?

- Very likely: 8% (Inner pie: Hospital care)
- Fairly likely: 41% (Inner pie: Hospital care)
- Not very likely: 42% (Inner pie: Hospital care)
- Not at all likely: 4% (Inner pie: Hospital care)
- Don’t know: 5% (Inner pie: Hospital care)

- Very likely: 9% (Outer pie: Non-hospital care)
- Fairly likely: 38% (Outer pie: Non-hospital care)
- Not very likely: 4% (Outer pie: Non-hospital care)
- Not at all likely: 4% (Outer pie: Non-hospital care)
- Don’t know: 5% (Outer pie: Non-hospital care)
IS PATIENT SAFETY AN IMPORTANT ISSUE IN THE EU?

Quality Improvement Reviewer perspective

Quality Improvement Reviewer perspective

Medico-legal reviewer perspective

% of patients experiencing AE during hospitalisation

Mean: 8.8

PaSQ European Union Network for Patient Safety and Quality of Care

European Commission
Patient safety is a key foundation of good quality healthcare « Two sides of the same coin »
PaSQ Specific Objectives

- Patient safety and quality network sustainability WP 1&7
- Patient Safety good clinical practices exchange mechanism WP 4
- Patient Safety good clinical practices implementation WP 5
- Quality improvement systems exchange mechanism WP 6
Expected benefits (1)

- Building of a collaborative Network on Patient Safety among EU MS and helping for a long-term engagement in the PaSQ Network
- Development of a permanent, financially sustainable business model for the Network after the end of this Joint Action
- Benefits from sharing knowledge experience and expertise at national, regional and institutional level in the participating MS

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European Commission
Executive Agency for Health and Consumers
Expected benefits (2)

- Benefits from the implementation of selected good practices (with a preference for those that are relevant for most MS)
- Better understanding of quality improvement systems in the EU to help structural changes in MS
- Provision of a well structured European overview on patients safety
- Building up potential for an EU peer review system for quality management systems in health care.
PaSQ tools

- Exchange mechanisms in MS (20/25): national and cross national exchange of knowledge and experiences
  - Site visits
  - National network building,
  - Mutual learning mechanism, on-line courses, twining programs, workshops
- PS good practices implementation (15 MS)
  - High 5?
  - Handover?
Some EU countries have already experienced such program (NL, DK, UK, Ir, Fr…)

The example of IAP (International Accreditation Program) and EPSO:

on site visits promoting exchange of experiences, twining programs, capacity building…
Context:


- Revision of the European Standardisation Directives to include Social and Health services in the field.
Article 4: Responsibilities of the Member State of treatment

1. Taking into account the principles of universality, access to good quality care, equity and solidarity, cross-border healthcare shall be provided in accordance with:
   (a) the legislation of the Member State of treatment;
   (b) standards and guidelines on quality and safety laid down by the Member State of treatment; and
   (c) Union legislation on safety standards.
DIRECTIVE of March 9, 2011
patients’ rights in cross-border healthcare (2)

- **Article 8:** Healthcare that may be subject to prior authorisation:
  - **Article 8-6 c:** The Member State of affiliation may refuse to grant prior authorisation for the following reasons: this healthcare is to be provided by a healthcare provider that raises serious and specific concerns relating to the respect of standards and guidelines on quality of care and patient safety, including provisions on supervision, whether these standards and guidelines are laid down by laws and regulations or through accreditation systems established by the Member State of treatment;
Regulation of the European Parliament and of the Council on European Standardisation

- Revision to include Social and Health services in the field.

“Article 1: Subject matter

This Regulation establishes rules with regard to the cooperation between European standardisation bodies, national standardisation bodies, Member States and the Commission, the establishment of European standards and European standardisation deliverables for products and for services”
Recital 8a “…it remains exclusively with the Member States to define the fundamental principles of their social security, vocational training and health systems and to shape the framework conditions for the management, financing, organisation and delivery of the services supplied within those systems, including without prejudice to Article 168 (4) the definition of requirements, quality and safety standards applicable to them…”

Commission is opposed to the last sentence

This text is supported by the EP and could be adopted in first reading

Main issue is commitology regarding the role of MS in the control of the European standardisation work programme.
Regulations
Accreditation
Directives
Standards

Cross Border
Directive

Draft paper
Quality

Reco PS

Senior Group
Public Health

MS
MoH

PaSQC

Certif.  Accre.  Guidelines  Indicators
HC Quality Improvement Agency

CEN  ECDC

Normative

CEN  ECDC

Exchange/network

ECDC  PaSQC

Parliament  Commission  Council

ECDC  PaSQC

Patient Safety
Working group

Participative
Italy is committed in
WP 2, 3, 4, 5 & 6

- The Ministry of Health will coordinate the participation of the following Italian partners:
  - AGENAS in WP 2 dissemination and 4 sharing of good clinical practices in Patient safety (Database)
  - Veneto Region Health Authority in WP 3 evaluation, WP5 implementation of good clinical practices in Patient Safety in HCOs & WP6 sharing of good national/regional organisational practices in Patient Safety and Quality of Care.

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European Union Network for Patient Safety and Quality of Care

[Logos]
PaSQ first open coordination meeting in Italy 2014

- Italian MoH agreed to welcome the organisation of PaSQ first open meeting at the beginning of the Italian Presidency of the EU (July 2014)
- Coordinating meeting open to the main EU and MS stakeholders in patient Safety and Quality of Care
- 200 people 2 days
Acknowledgement to PaSQ’ 61 partners!
Thank you for your attention