



## PaSQ 5th Coordination meeting

Council conclusions on patient safety and quality of care

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## Italian Presidency of the Council of the EU July – December 2014

- Chief medical officers, Regular meeting, Rome 6-7 October 2014
- Conference on Quality, Safety and Cost-Effectiveness, Rome, 3 – 4 November 2014
- <http://www.salute.gov.it/portale/ItaliaUE2014/dettaglioEvento.jsp?lingua=italiano&id=208>
- Council conclusions on Patient safety and quality of care, including the prevention and control of healthcare associated infections and antimicrobial resistance, EPSCO Council meeting, 1 December 2014
- Conference on antimicrobial resistance - AMR, Rome 22-23 December 2014 ([m.pompa@sanita.it](mailto:m.pompa@sanita.it))



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Italian Presidency of the Council of the EU  
July – December 2014

Council conclusions on "Patient Safety and quality of care, including the prevention and control of Healthcare Associated Infections and contrast to the Antimicrobial Resistance"



## Council conclusions on patient safety and quality of care

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### Background

- Based on a proposal by the Italian Presidency
- Informally discussed with stakeholders
- Presented and discussed within the Working Party on Public Health during several meetings from September to November 2014, with:
  - Council of EU
  - European Commission – DG SANCO
  - Italian Presidency
  - Representatives of EU Member states



## Council conclusions on patient safety and quality of care

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### Background

Based on the previous experience of the Recommendation 151/2009  
and on the experiences gathered in these years

Especially on the work carried out during the PASQ Joint Action  
which gave us the possibility to share experiences and knowledge



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### Approved by

- Working Party on Public Health, 7 November 2014
- Coreper (Permanent Representatives Committee of MS) 26 November 2014
- EPSCO Council, 1 December 2014
- Published (2014/C 438/05) by the Official Journal of the EU, C438, Vol. 57, 6 December 2014, 7-11



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Establish and develop policies  
and programs on

1. Patient Safety and Quality of Care

2. Prevention and Control of Healthcare Associated Infections  
and Antimicrobial Resistance



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### Actions for

- Member States
- Member States and Commission
- Commission





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### **Actions for Member States**

1. Implementing Council Recommendation 2009/C 151/01
2. Accountability
3. Education and Training
4. Guidelines
5. Culture in all settings
6. Just and blame-free reporting
7. Patients empowerment
8. Cost-evaluation
9. Health-care associated infections
10. AntiMicrobial Resistance - AMR



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### Council Recommendation

1. Intensify their efforts in implementing the Council Recommendation 2009/C 151/01, considering the priority areas identified in the conclusions of the two Commission's implementation reports, as well as the two reports on education and training and reporting and learning systems.

### Accountability

2. Identify (if not already done) the authorities in charge of the implementation and monitoring of integrated PS strategies, including the prevention, surveillance and control of HAI.



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### Education and Training

3. Promote the education and training of healthcare staff on PS and HAI, ensuring the availability of appropriately trained staff, including specialised infection control staff, in healthcare settings.

### Guidelines

4. Work on implementation of guidelines, recommendations and good practices on PS, HAI and AMR, and the use of the WHO taxonomy on patient safety to improve clinical and organisational performances



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### Culture in all settings

5. Encourage health professional organisations to build an inter-professional PS culture which allows integrated and high-quality processes of care

and

Share experience on strategies to ensure patient safety and quality of care between and across all settings of care (considering the current trend of shifting care from hospitals to outpatient care)

### Just and blame-free reporting

6. Develop measures that allow just and blame-free reporting by health professionals or patients and support blame-free handling of errors and adverse events as well as learning from them



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### Patients empowerment

7. Encourage the participation and empowerment of patients, families and their informal caregivers, as well as patient organizations, through evidence-based and unbiased provision of information and education, and promote patients participation in decision-making in the healthcare process in order to contribute to the prevention of adverse events;



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## Cost-evaluation

8. Consider the opportunity of developing cost-effective evaluation of patient safety programmes, also on the basis of the results of "Programme for the Union's action in the field of health (2014-2020)"



## Health-care associated infections

9. Intensify the prevention, diagnosis, monitoring and control of HAI, also by adopting, implementing and monitoring professional guidelines at national level, where appropriate in close cooperation with the ECDC

and

Reinforce programmes and plans for infection prevention and control throughout the care and cure process, including tailored programmes for nursing homes and long-term care facilities



## Anti-Microbial Resistance AMR

10. Develop professional guidelines on the prudent use of antibiotics, devoting special attention to antimicrobial resistance as stated in the Council Conclusions of 22 June 2012,

and

Monitor the prescriptions/consumption of antimicrobial agents and implement the surveillance of antimicrobial resistance, including participation in EU surveillance networks on these issues as coordinated by the ECDC and the EMA





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### **Actions for Member States and Commission**

1. Patient Safety Culture
2. Research on patient safety and quality of care
3. Guidelines on training and reporting
4. Information on adverse events
5. Patients involvement
6. Standards and guidelines on patient safety
7. Work on the dimensions of quality
8. Sustainable EU Collaboration
9. Cost-effectiveness
10. Cooperation between the human health and the veterinary sectors
11. Antimicrobial resistance



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### PS Culture, Research, Guidelines and Data

1. Promote patient safety culture → just and blame-free reporting on adverse events at healthcare setting level and work towards measuring and improving patient safety culture;
2. Take into account research results while developing policies and programmes and promoting further research on patient safety and quality of care
3. Regularly review the practical guidelines on the education and training of health professionals and on reporting and learning systems;
4. Promote the collection of information on adverse events



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### Patients, Standards and Quality

#### Develop

5. EU guidance for patient/citizens' involvement in strategies on patient safety, taking into account the work of the WHO
6. Voluntary guidelines on how to establish standards and guidelines on PS, taking into account existing methodologies and guidelines used both by national competent authorities and by health professional and scientific associations;
7. Further work on the dimensions of quality in healthcare, taking into account existing knowledge;



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### Collaboration

8. Finalize by December 2016 a framework for a sustainable EU collaboration on patient safety and quality of care, also taking into account the results of the "Joint Action on patient safety and quality of care" (PaSQ);



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- Cost-effectiveness

9. Work towards a better understanding of the cost-effectiveness of patient safety policies under the principles of efficacy, efficiency, appropriateness, safety and quality of care;
10. Improve strategies for patient safety based on the outcomes of the Action "Study on costs of unsafe care and cost-effectiveness of patient safety programmes ";



## Cooperation between the human health and the veterinary sectors and antimicrobial resistance

11. Further strengthen the cooperation between the human health and the veterinary sectors in order to address the rising threat from antimicrobial resistance;
12. Strengthen and coordinate research and innovation efforts to address antimicrobial resistance, in particular by providing support to the Joint Programming Initiative on Antimicrobial Resistance.



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### Actions for Commission

1. Support Member States
2. Coordinate EU activities
3. Monitor developments in PS and HAI
4. Information to patients on patient safety
5. HAI
6. AMR



## Supporting and coordination

1. Continue supporting Member States in improving strategies and programmes for PS in all settings of care based on the findings of the two Commission's implementation reports of the Council Recommendation 2009/C 151/01;
2. Ensure coordination of EU activities on PS and quality of care, including treatment errors and HAI and AMR with the scientific support of relevant EU agencies, and taking into account the work of WHO and OECD;





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### Monitoring

3. Continue monitoring developments in PS and HAI in Member States and at EU level and report its findings on the trends of patient safety policies, the main causes of adverse events and the areas requiring further actions;



## Information to patients on PS

4. Explore the feasibility to present a proposal for Council Recommendation on the provision of information to patients on patient safety following the Council Recommendation 2009/C 151/01, and following further preparatory work with the Member States on the dimensions of quality of healthcare;



## HAI and AMR

5. Monitor the implementation of the EU case definitions of healthcare associated infections and participation of Member States in EU surveillance of healthcare associated infections as coordinated by the ECDC;
6. Ensure a continuation of the EU Action Plan on Antimicrobial Resistance post 2017, including an emphasis on the prevention and control of healthcare associated infections



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For future activities consider the actions proposed in the Council Conclusion for:

- Member States,
- Commission and...both
- Member States and Commission

since we know what we have to do .....the only thing is how to do



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***THANK YOU FOR YOUR ATTENTION***