



KEYNOTE SPEAKERS:

Prof. Jeffrey Braithwaite, Australia and Prof. Erik Hollnagel, Denmark

FRONTIERS OF PATIENT SAFETY

The Safety of Telemedicine - What Can Resilient Health Care Contribute?

TELEMEDICINE is rapidly spreading in health care. Yet, health care seems to be in something of a love-hate relationship with telemedical devices and changes in working processes.

Advocates for telemedicine emphasize its potential to facilitate doctor-patient encounters and follow-up because it can bridge geographical distances and increase accessibility.

Opponents of telemedicine point out that both face to face interaction and confidential dialogue between health care personnel and patient, as well as professional decision-making and treatment by health care practitioners are at risk.

RESILIENT Health Care has brought important new impulses, tools and methods to patient safety, such as Safety-II, resilient potentials and the Functional Resonance Analysis Method. In this seminar, we will explore safety issues from a resilient health care perspective with a focus on work processes and everyday behaviors.

PARTICIPANTS WILL LEARN about principles and methods of Resilient Health Care, Efficiency-Thoroughness Trade-off and how resilience engineering can contribute to the safety of telemedicine. We present examples from Denmark and Australia, a country where telemedicine is a necessity.



SEE YOU AT
HEALTH INNOVATION CENTRE OF SOUTHERN DENMARK
ON THURSDAY AUGUST 16TH, 2018
FROM 12 TO 17 O'CLOCK

TILMELDING: <http://rsd.plan2learn.dk/kursusvalg.aspx?id=56933>

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— *“Resilience is an expression of how people, alone or together cope with everyday situations – large and small – by adjusting their performance to the conditions. An organisation’s performance is resilient if it can function as required under expected and unexpected conditions alike (changes/disturbances/opportunities).”*
(Hollnagel, 2018)

— *“Telemedicine is conceived of as an integrated system of healthcare delivery that employs telecommunications and computer technology as a substitute for face-to-face contact between provider and client.”*
(R.L. Bashur, 1995)