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Serious adverse events in primary health care services – quality improvement areas identified

Helsetilsynet
TILSYN MED BARNEVERN, SOSIAL- OG HELSETJENESTENE

The Norwegian Board of Health Supervision

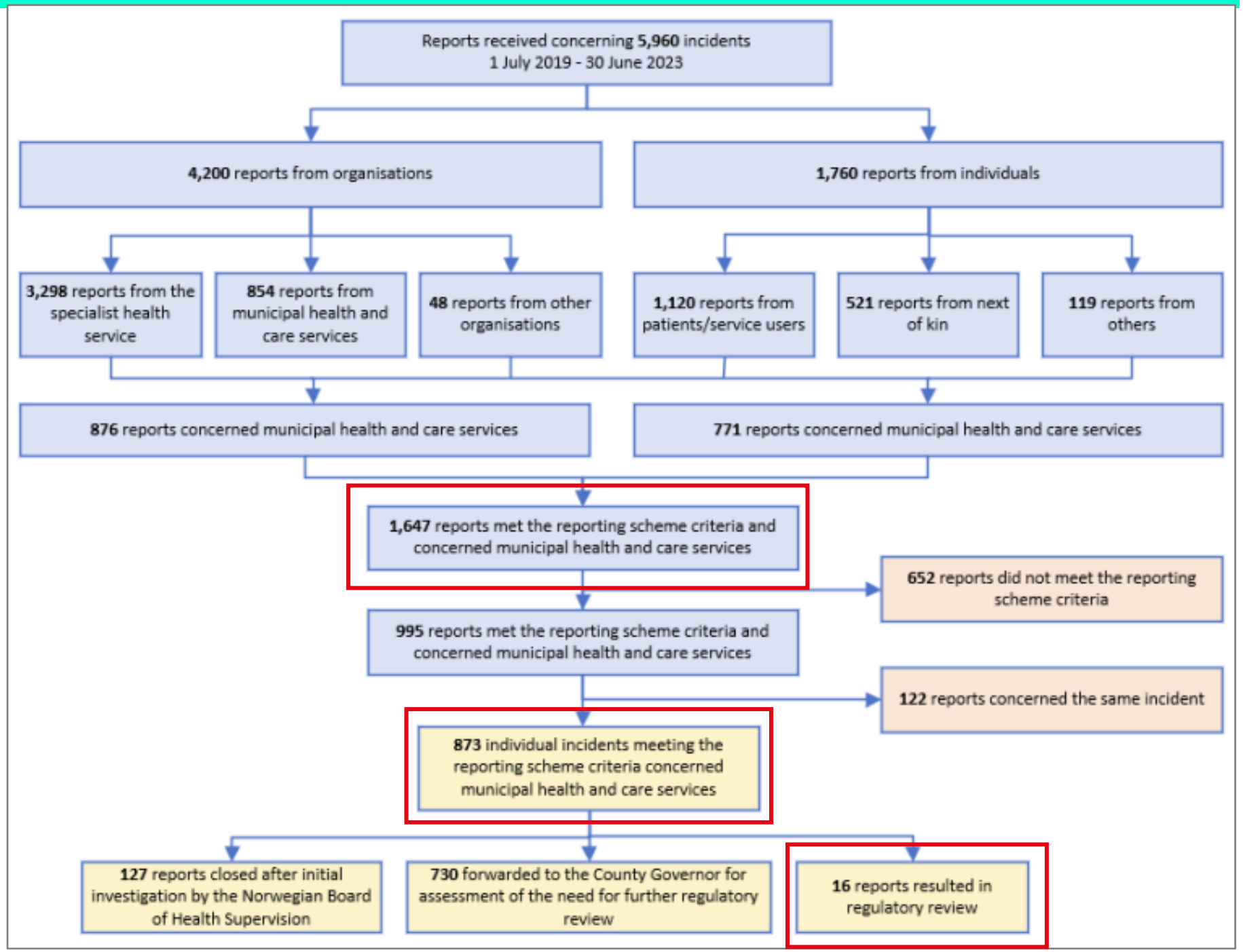
The overall aim of public supervision in Norway is to ensure that health and social services are provided in accordance with national acts and regulations.

Changes in the reporting system

- Prior to July 1, 2019
  - the **duty** to report serious adverse events resulting in patient death or serious injury only applied to the specialist health services

- After July 1, 2019
  - all health care providers received a corresponding **duty** to report (including the municipal health care services)
  - patients and the next of kins received a **right** to report

The context


Reports received concerning 5,960 incidents
1 July 2019 - 30 June 2023
4,200 reports from organisations
1,760 reports from individuals
3,298 reports from the specialist health service
854 reports from municipal health and care services
48 reports from other organisations
1,120 reports from patients/service users
521 reports from next of kin
119 reports from others
876 reports concerned municipal health and care services
771 reports concerned municipal health and care services
1,647 reports met the reporting scheme criteria and concerned municipal health and care services
652 reports did not meet the reporting scheme criteria
995 reports met the reporting scheme criteria and concerned municipal health and care services
122 reports concerned the same incident
873 individual incidents meeting the reporting scheme criteria concerned municipal health and care services
127 reports closed after initial investigation by the Norwegian Board of Health Supervision
730 forwarded to the County Governor for assessment of the need for further regulatory review
16 reports resulted in regulatory review

Criteria for selection of cases for incident-based regulatory review

- The most complicated incidents in serious and complex cases

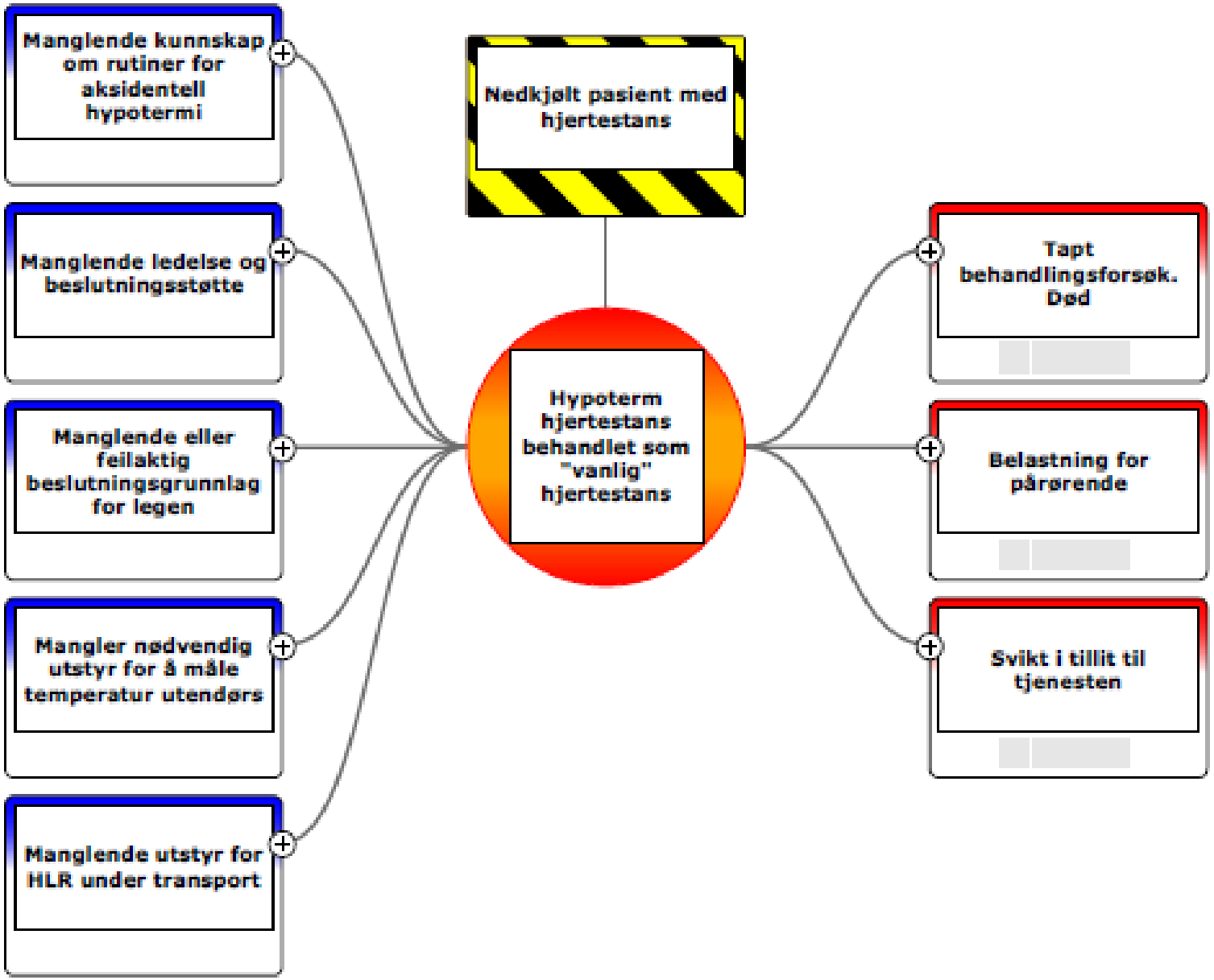
- A special focus on
  - Psychiatric diseases and suicides among young patients
  - Unexpected deaths among young patients
  - Not Norwegian speaking patients

Aims

- **The aims for the incident-based regulatory reviews** are to identify risk areas, which risk mitigation and harm reduction actions are needed or have been undertaken in order to raise standards of care and trust in the service

- **The aim of this study** was to identify risk areas and quality improvement efforts identified by the regulatory reviews by using a system perspective

Bowtie risk assessment methodology



Figur 1 Eksempel på sommerfugldiagram som viser en risiko og konsekvenser av å feiltolke hypoterm hjertestans

Method

- We used a modified quality content analysis of text in the post-incident reports

- Can we identify any common …
  - features described in the reports?
  - risk areas in a system perspective?
  - quality improvements efforts suggested or implemented?

Areas with possibilities for quality improvement

- Lessons learned
- Drug administration systems
- Procedures for use of technical solutions
- Coordination and cooperation
- Risk assessment systems
- Systems for ensuring medical attendance during busy periods

Conclusions

- Through the incident-based supervisions, we have identified important areas with possibilities for risk reduction and patient safety improvements

- Post inspection reports are important sources for learning and quality improvement beyond the particular incident and between organizations:
  - Focus on the system – not the individual
  - Assessments of the actions taken in each case are described
  - Post-incident quality improvement efforts are included

Read more?

The article can be read here

https://www.helsetilsynet.no/globalassets/publikasjoner/rapport-fra-helsetilsynet/2024/hrlsetilsynetsrapport1_2024_varsler_kommunal_helse_omsorgstjenester.pdf

In English
https://www.helsetilsynet.no/globalassets/opplastinger/english/helsetilsynetsrapport1_2024_english.pdf

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