

# SaQushal: Patient Safety Self Assessment Tool

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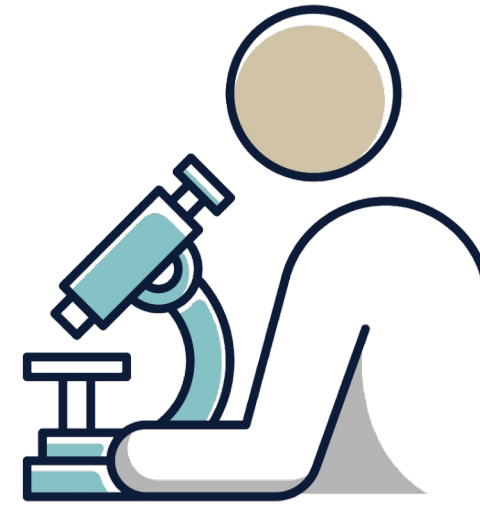
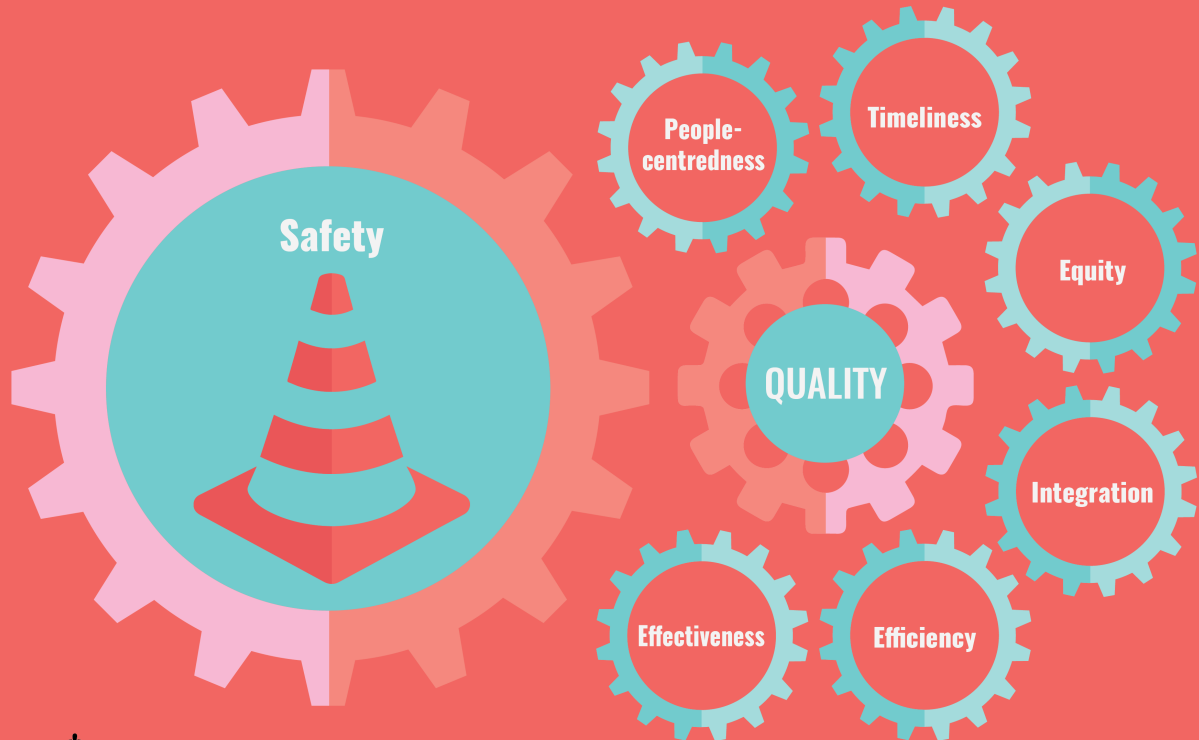
# Dimensions of the Quality



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## Quality health care is *safe*.

This means the care you receive does not harm you.  
Around the world, nearly 14% of patients are harmed from the health care they receive during their hospital stay.



Safety : An important dimension of the Quality

# Strategic Objectives under NPSIF

## National Patient Safety Implementation Framework

Structural systems to support Quality  
& Safety

Assessment & Reporting of Adverse  
event

Competent and Capable  
Workhouse

Control of Healthcare Associated  
Infections

Strengthen Patient Safety across all  
Programs

Promote Patient Safety Research

Priority Areas

Key Interventions



## National PATIENT SAFETY IMPLEMENTATION

Framework (2018-2025)

INDIA



MINISTRY OF HEALTH & FAMILY WELFARE  
Government of India

# Tasks defined under NPSIF (2018-2025)

Priority areas	Interventions	Responsible organizations/ Institutions
1.2 Strengthen quality assurance mechanisms, including accreditation system	1.2.1 Development and commissioning of minimum patient safety standards and Indicators	MoHFW/ National Patient Safety Secretariat
	1.2.2 Incorporate selected Patient Safety indicators as key performance indicators within the Quality Assurance Program	NHSRC
	1.2.3 Incorporate selected Patient Safety indicators within the accreditation system for hospitals and laboratories, including entry level accreditation	NHSRC NABH/ NABL
	1.2.4 Introduce hospital performance monitoring/ ranking system based on number of indicators, including patient safety indicators	HMIS & NHSRC
	1.2.5 Establish Special Commission to declare "Patient Safe Healthcare Institution" based on adherence to defined standards (Quality Assurance, NABH, etc.)	MOHFW/DGHS
	1.2.6 Streamline accreditation programs for availing incentives in reimbursement benefits the insurance providers	NABH/NQAS/STATE STANDARD/ BIS/ IRDA/ RSBY
	1.2.7 Incorporate fire safety, seismic safety, device safety, structural safety of healthcare facilities into the existing Quality Assurance and Accreditation standards	NABH/NQAS/NATIONAL BUILDING CODE/state govt.
1.3 Establishing a culture of safety and improving communication, patient identification, handing over transfer protocols in healthcare facilities	1.3.1 Develop comprehensive communication strategy for Patient Safety, targeting different stakeholders	MOHFW/DGHS
	1.3.2 Streamline standardization of Patient Safety initiatives at different levels of care through SOPs, algorithms, checklists, etc. (link to Strategic Objective 5)	MOHFW/DGHS /NHSRC

# Patient safety embedded in quality framework

S



NQAS for  
DH, CHC,  
PHC and  
UPHC

2013

A



Improving  
cleanliness,  
hygiene &  
IPC  
practices

2015

F



Quality  
intervention  
for LR & M-  
OT

2017

E



NQAS for  
HWC -SC

2020

T



Quality  
Intervention  
for SNCU,  
NRC, Paed.  
OPD &  
wards

2021

Y



# Need for Patient Safety Self-Assessment Tool

- Strengthen and streamline the existing quality assurance certification process under the NQAS
- Establish a credible system for reporting of adverse events to monitor extent of patient safety issues and learn from them
- Proposed tool further strengthens with the incorporation of following components:

1	Patient Engagement	2	Human Ergonomics	3	Healthcare Worker's Safety
4	Reporting & Learning System	5	Reliable Health System	6	Blame free Environment
7	Safety Culture	8	Ability at Point of Care	9	Patient Safety Indicators



# Key features of SaQushal





# Implementation Structure

## National Quality Assurance Standards

NQAS



LaQshya



Kayakalp



MusQan



SaQushal



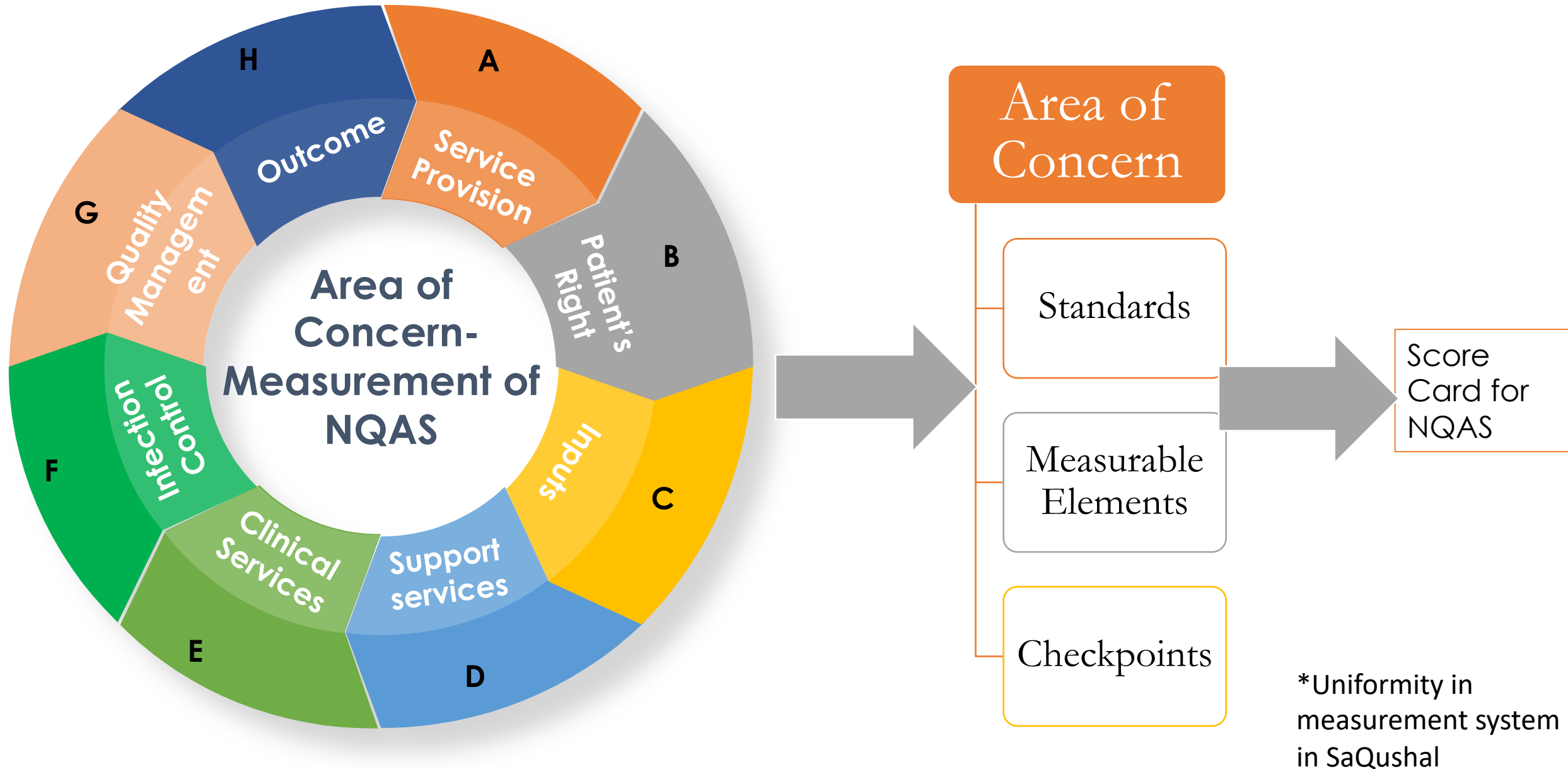
Facility level quality team

District quality assurance committee

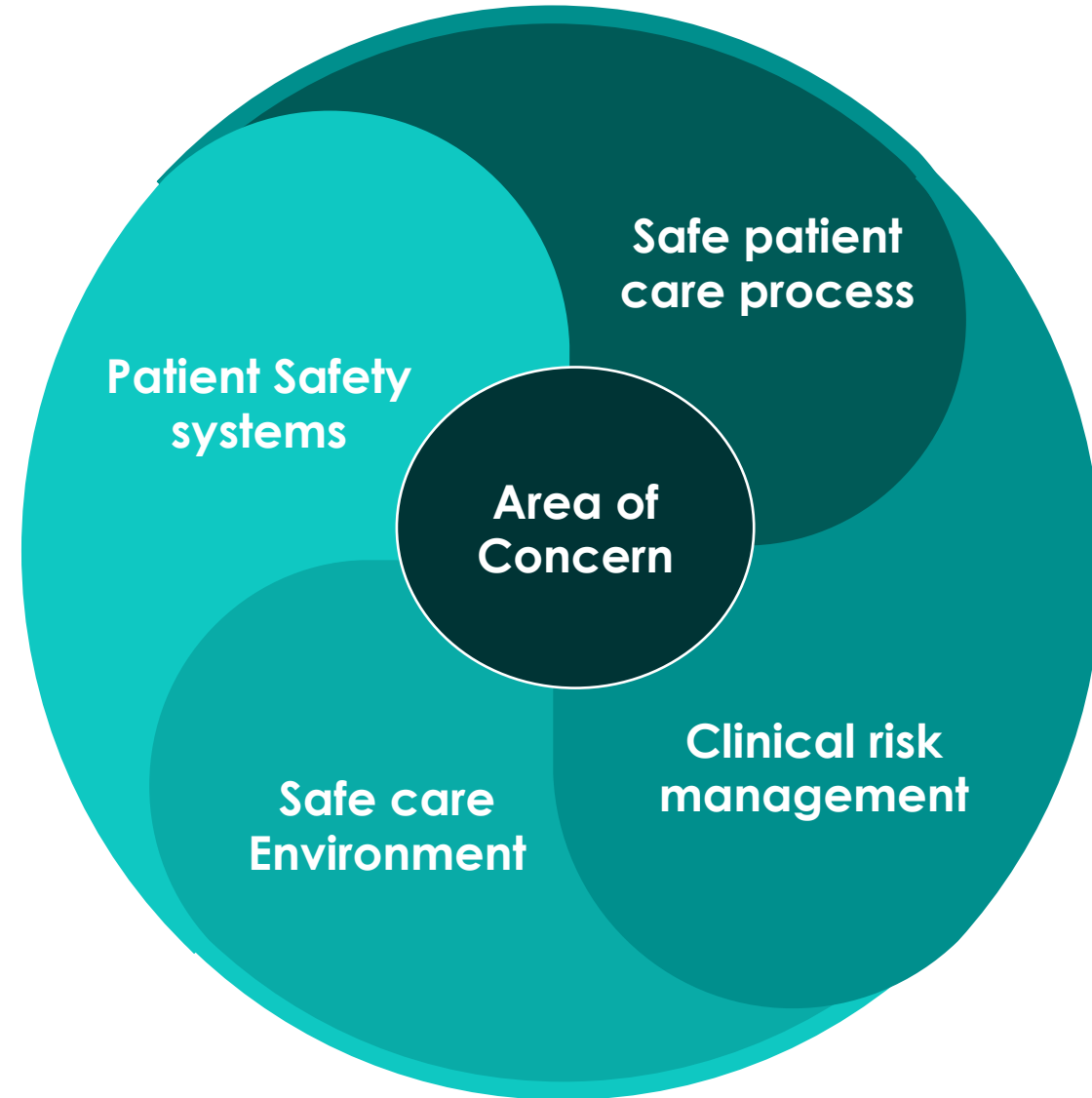
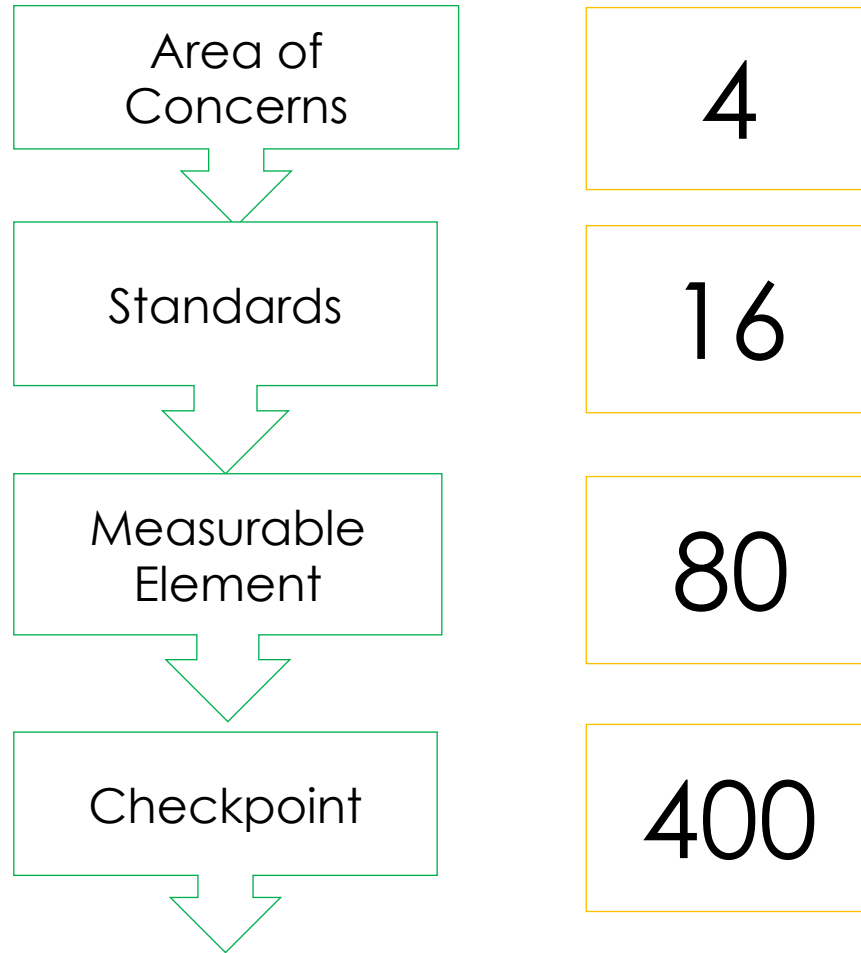
State quality assurance Committee

Central quality supervisory committee

# Measurement System\* in NQAS



# Arrangement of Standards in SaQushal



# Area of Concern

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**Safe Patient Care process:** Medication safety, IPC, prevention of Patient harm, communication

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**Clinical Risk Management:** Safety across life cycle , General clinical care, High risk clinical processes, and speciality clinical services

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**Safe Environment:** Physical safety, Ergonomics and human factor, Support and maintenance, hygiene and environment control etc

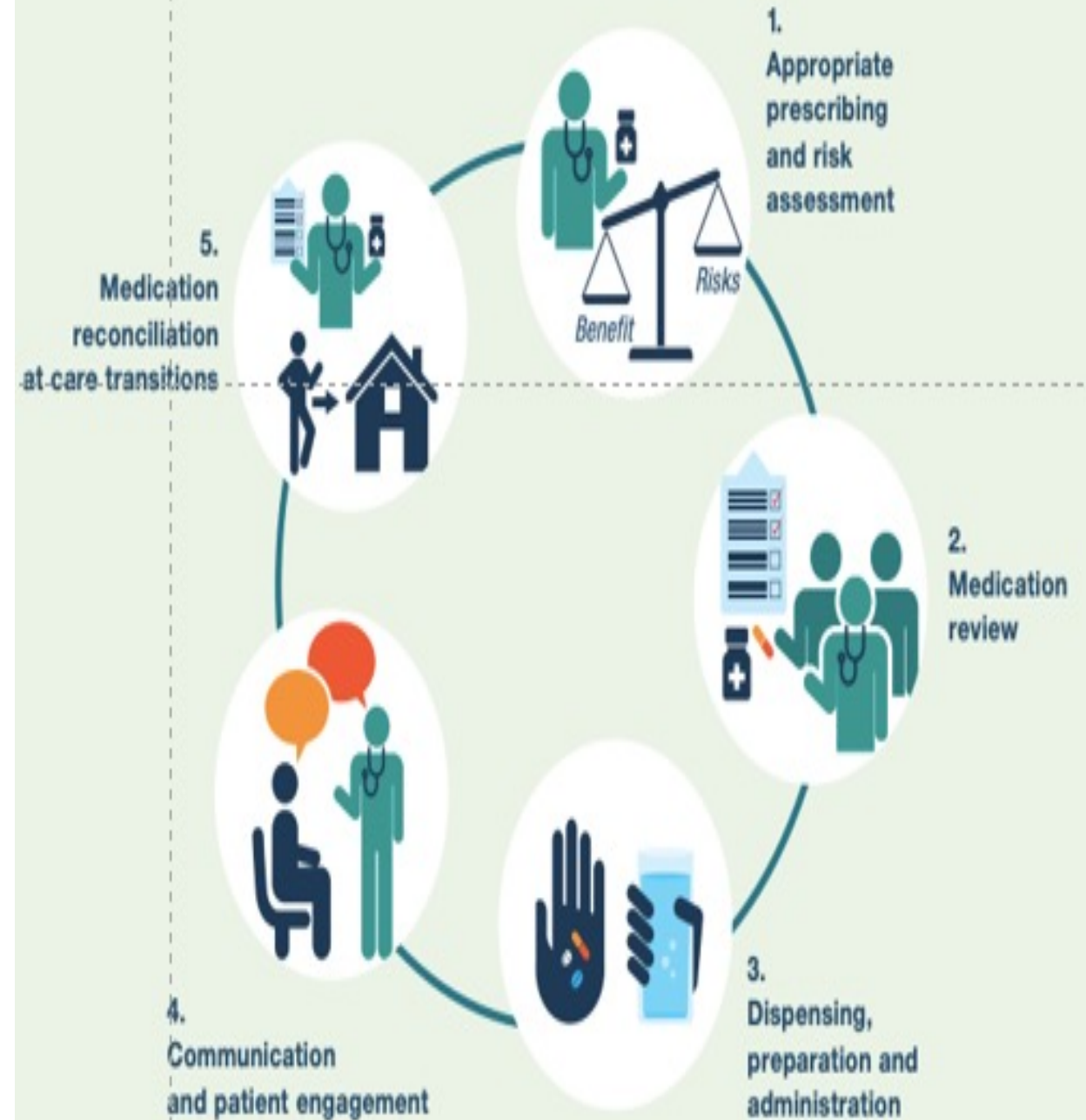
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**Systems for Patient Safety :**Hospital preparedness, leadership, Governance, patient engagement, competency of staff and safety

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# Medication Safety

- Safe prescribing practices
- Storage and dispensing
- Preparation and administration of medicines
- Medication review and optimization
- Managing high-alert drugs and adverse drug events



# Score Cards

## Overall Score & Area of Concern wise Scores

Patient Care Processes	Clinical Risk Management	Overall Score	Safe Care Environment	Patient Safety System
50%	50%	50%	50%	50%

# Score Card- Standard wise Scores

Reference No	Standard	Percentage
Area of Concern A- Safe Patient Care Processes		
Standard A1	<b>Medication Safety:</b> The hospital has a medication management system to ensure safe medication practices at all times	50%
Standard A2	<b>Infection prevention and Control:</b> The hospital has an infection control programme to ensure safe infection control practices at all times	50%
Standard A3	<b>Safe patient handling and Harm prevention:</b> The hospital has an established system to ensure safe patient handling and harm prevention in all clinical care settings	50%
Standard A4	<b>Communication at transition of care:</b> The hospital has an established system to ensure safe patient transport and referrals	50%



# Conduct of the assessment at the facility



# Roadmap for Patient Safety

## Immediate Activities

### A. At facility level

- Conduct of patient safety self-assessment, biannually
- Gap identification, prioritization of gaps, preparation of time-bound action plan

### B. At state level

- Reviewing safety score in SQAU meetings and monitor the improvement in safety score
- Handhold the facility in gap closure and provide support

## Long-term Activities

### A. At facility level

- Setting Safe Patient Objectives in all departments
- Submission of incident reports to DQAU and SQAU on quarterly basis
- Recognition of safety champions at the facility level for motivation and encouragement

### B. At state level

- Benchmarking of the health facilities based on safety score and indicators
- Sharing of best practices within the state and nationally as well
- Recognition of best performing facilities and their felicitation.



**SaQushal- Our commitment for building SAFE healthcare facilities.**