



"Enhancing Patient Safety in Healthcare Facilities"

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Presented by



Health Facilities

Facilities	Daman	Diu	DNH	Total
District Hospital	1	1	1	3
Sub District Hospital	-	-	1	1
Community Health Centre	1	1	2	4
Primary Health Centres (HWC)	3	1	8	12
U-PHC (Co-located)	1	-	2	3
Urban Health & Wellness Center (UHWC)	-	-	1	1
Sub-centres (HWCs)	20	6	54	80
Ayush Dispensary	-	-	1	1
Total	26	9	70	105



Background

- SaQushal Assessment was implemented at all DH/SDH in the UT of DNH & DD.

Type Of Facility	Number of Facilities Assessed	Average Score Obtained
DH	3	83
SDH/CHC	1	73

Common Gaps Identified in Assessment

Area of Concern A: Safe Patient Care Processes

Std:

- Safe Patient Handling and harm prevention in all clinical area.
- Identification and Assessment of Patients prone to fall like Old age/instability/urinary incontinence etc.

❖ Key Improvements under Facilities:

- Unique Patient identification system for high risk patients.
- Dedicated Ques for High Risk Patients eg-Geriatric/ANC/etc.
- Provision of ramps/wheelchairs and walking aids.
- Volunteer Groups for assisting High Risk Cases.

Area of Concern B: Clinical Risk Management

Std:

- Safety in speciality clinical services and High Risk Clinical Processes.
- Safety in Palliative Care and Geriatric Care.

- ❖ Key Improvements under Facilities:
 - Focus on early identification of conditions & pain management.
 - Make sure that the treatment plan are informed to family members
 - MO to guide CHO to take home visit after discharge & follow up regularly.

Area of Concern C: Safe Care Environment

Std:

- Preventive measures for safe Patient handling.
- Facility provide safety gear at work place for staff.
- Less number of high adjustable chairs were seen in the facility.

❖ Key Improvements under Facilities:

- Availability of high chairs to be provided in every facility. Procurement file to put up to rectify.

Area of Concern D: Patient Safety system

Std:

- Functional system for reporting and learning of adverse events.
- Identifying and investigating adverse events ,errors and near miss incidents.

❖ Key Improvements under Facilities :

- Perform root cause analysis for all types of reported incidents & departmental.
- CAPA/ action plan should be prepared with proper details in a defined interval.



Key Learnings

- Engaging patients and their family members throughout the treatment procedure with proper communication.
- By using monitarized technology human error can be reduced which includes proper safeguarding of patient records and staff handover related error can be minimized.
- During training feedback mechanisms should be implemented in each facility which can impact betterment in the performance of the staff.
- Quality tools and RCA-CAPA should be used in each department in order to enhance more patient safety.

Thank you