

Patient Safety Research

A guide for developing training programmes



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Foreword



Unsafe care is a global problem everywhere. WHO Member States, specialized agencies and institutions are working hard to develop solutions that can tackle the most pressing safety concerns. Much has been accomplished, but much more still needs to be done. Innovations and safety practices need to be developed and adopted by health-care staff and institutions. In many cases, they also need to be customized to maintain their efficacy. New interventions are also needed, and the benefits of all these efforts must be evaluated in order to assist decision-makers in making the right choices that lead to improved patient safety.

So, safer care needs systematic approaches and methodologies that lead to better understanding of the nature and magnitude of safety problems and of their contributing factors.

In 2008 WHO Patient Safety identified a set of core competencies needed for conducting patient safety research as a basis for improvement. These represent a recognition of the need to strengthen the health task force internationally in order to facilitate systematic improvements in patient safety in all parts of the world. The essence of these competencies is the science of patient safety, the methodologies for epidemiology and health services research and principles for knowledge translation.

How to effectively develop these competencies through tailored training programmes is the basis of this guide. It intends to guide educators in addressing the design and general content areas of training curricula for postgraduate researchers and practitioners aiming to apply those concepts in the area of patient safety.

By providing examples of learning objectives and the necessary steps for course development, educators can choose the specific competencies that need to be taught and the methods that best fit particular cases, based on the learner's profile, goals and resources.

I wholeheartedly hope that this guide will help to build the necessary capacity for improving patient safety worldwide, especially in those countries where it is most needed.

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1. Introduction

1.1 What is this guide?

This guide is a comprehensive document that provides guidance to educators for the development of training programmes in this important, but less well known, field of research. This guide addresses research for change or research for improvement – a form of translational and applied research that seeks to improve patient safety based on sound methodology.

It is based on the principle that effective improvement requires sound local evidence about the nature and extent of existing problems and risks and about the possible solutions, including the systematic analysis of how specific interventions fit and fare within the local context. Therefore, instead of prescribing a single, comprehensive curriculum, this guide seeks to build global capacity for patient safety and translational research by facilitating the development of many locally-specific curricula on these topics.

This guide brings current concepts on curriculum building, training and education to the field of patient safety research. It is designed to offer practical guidance for local educators to develop promote the expansion of training programmes in these areas worldwide. WHO welcomes further feedback from users from different parts of the world

1.2 Why is this guide needed?

Increasing evidence suggests that an unacceptable number of patients are harmed every day in health care. Patient safety is a global public health problem affecting countries at all levels of development. More knowledge and better use of that knowledge are essential for improving patient safety.² However, patient safety research is still in its infancy. New knowledge is required to measure and understand the risks and causes of harm and to develop solutions that prevent, reduce or mitigate the effects of harm. In many clinical settings worldwide, little is known about the epidemiology of patient safety problems. Although there have been many attempts to introduce solutions that improve safety, few of these interventions have been subjected to evaluation.^{3,4} New and further research is thus imperative to reduce harm and improve the safety of care.

Despite significant progress in some areas of patient safety, infrastructure and funding for

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