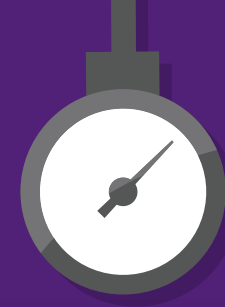
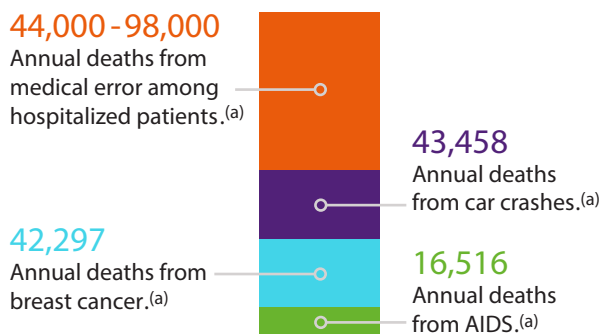


FREE FROM HARM: ACCELERATING PATIENT SAFETY IMPROVEMENT FIFTEEN YEARS AFTER TO ERR IS HUMAN

Report of an expert panel convened by the National Patient Safety Foundation argues for looking at morbidity as well as mortality caused by medical errors and going beyond hospitals to improve safety across the continuum of care.



TO ERR IS HUMAN FRAMED PATIENT SAFETY AS A SERIOUS PUBLIC HEALTH ISSUE (1999 ESTIMATES)



TO UNDERSTAND THE FULL IMPACT OF PATIENT SAFETY PROBLEMS, WE MUST LOOK AT BOTH MORTALITY AND MORBIDITY



1 in 10 patients develops a health care acquired condition (such as infection, pressure ulcer, fall, adverse drug event) during hospitalization.^(b)

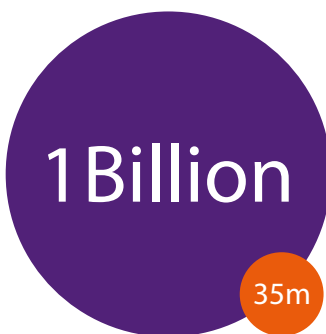
BY SOME MEASURES, HEALTH CARE HAS GOTTEN SAFER SINCE TO ERR IS HUMAN



1.3 Million

Estimated reduction in hospital-acquired conditions (2011-2013) as a result of the federal Partnership for Patients initiative.^(b)

BUT WE MUST LOOK BEYOND HOSPITALS TO THE FULL CARE CONTINUUM



Roughly 1 billion ambulatory visits occur in the US each year.^(c)



About 35 million hospital admissions occur annually.^(c)

ADVANCEMENT IN PATIENT SAFETY REQUIRES AN OVERARCHING SHIFT FROM REACTIVE, PIECEMEAL INTERVENTIONS TO A TOTAL SYSTEMS APPROACH TO SAFETY^(d)

- 1 | Ensure that leaders establish and sustain a safety culture.
- 2 | Create centralized and coordinated oversight of patient safety.
- 3 | Create a common set of safety metrics that reflect meaningful outcomes.
- 4 | Increase funding for research in patient safety and implementation science.
- 5 | Address safety across the entire care continuum.
- 6 | Support the health care workforce.
- 7 | Partner with patients and families for the safest care.
- 8 | Ensure that technology is safe and optimized to improve patient safety.