Future developments for patient-safety research in general practice in the UK

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Focusing on the work of the NIHR (English) School for Primary Care Research and the Manchester Patient Safety Translational Research Centre

Background

- Reasonable levels of funding have been available for patient safety research in the UK

In recent years, e.g. Department of Health Patient Safety Research Portfolio

- Two large-scale (mainly secondary care) NIHR patient safety research centres funded in 2007

- Recent success in obtaining funding through the NIHR School for Primary Care Research, and for a new NIHR Patient Safety Translational Research Centre

NIHR School for Primary Care Research

- 8 English academic departments of general practice/primary care involved
- Around £16m/€20m funding available over 5 years (2009-15)
- Patient Safety Research Theme established
- Successful bid (£600K/€750K) made in 2011 to develop, test and evaluate a patient safety toolkit for use in general practices
    - Involves the universities of: Nottingham (Avery, Slight), Manchester (Campbell, Esmail, Reeves) , Keele (Kadam, Porcheret), Oxford (Valderas, Aronson, Lasserson), Birmingham (Gill, Greeenfield), Bristol (Purdy), Southampton (Little, Moore) and Edinburgh (Sheikh)

Patient safety toolkit project

Aims

- To produce an operational definition of safe general practice;
- To identify tools for assessing the safety of general practices and obtain consensus on their use in the *Patient Safety Toolkit*;
- To test these tools in a sample of general practices;
- To investigate the implementation of the *Toolkit.*

Developing the patient safety toolkit (1)

We have undertaken three systematic literature reviews to identify:
i) Tools, and associated outcome measures, used to assess aspects of patient safety in general practices;
ii) Qualitative studies on the experience of patients and/or health professionals of patient safety in general practice.
iii) Patient-safety related PROMs and PREMs

We have undertaken two RAND Appropriateness Methods exercises to obtain consensus on:

i) Key attributes of patient safety in primary care and the elements needed in a patient safety toolkit;
ii) Prescribing safety indicators to assess the safety of prescribing in general practice;

We are in the process of creating a conceptual framework of the key attributes of safe general practice;

Developing the patient safety toolkit (2)

We have developed new methods for extracting data from GP computer systems for prescribing safety indicators;

We will soon conduct a survey of international general practice organisations to identify any additional tools for assessing patient safety;

We will soon conduct interviews with UK and international experts to explore the attributes of safe general practice;

As a result of our systematic review we will developing Patient Reported Outcome Measures to assess patient safety in general practices;

Finally, we will select a set of tools for testing in a sample of general practices.

Testing elements of the toolkit

- A combination of qualitative and quantitative techniques will be used (in a sample of 30 general practices) to test the particular attributes (acceptability, technical feasibility, reliability, and validity) of the different elements of the *Patient Safety Toolkit*.
- The final set of tools will be selected based on their performance and coverage of key safety issues.

Evaluating the toolkit

Using a combination of qualitative and quantitative techniques (in a sample of 50-60 general practices), we will:

a) Obtain feedback from practices on implementation issues;

b) Describe variations in patient safety between general practices;

c) Identify and (where possible) estimate the potential costs and benefits of implementing the *Patient Safety Toolkit*;

d) Identify potential predictors of patient safety;

e) Obtain data for future sample size calculations.

We shall then consider the best approach to making an application for a NIHR Programme Grant to develop and test an intervention aimed at improving patient safety based on the use of the *Patient Safety Toolkit*.

MATRiC PCPS

Manchester Translational Research Centre for Primary Care Patient Safety

- Funded by NIHR: £6m/€7.5m over 5 years from August 2012

- Led by Stephen Campbell (PI) with Aneez Esmail as Director

MATRiC PCPS - aims

- To develop evidence-based approaches to keep patients safe in their interactions with primary care;

- To develop capacity in primary care patient safety research;

- To develop and test educational interventions aimed at both patients and practitioners to improve patient safety.

MATRiC PCPS - themes

- Medication safety
  - Prof Darren Ashcroft,
- Multimorbidity
  - Prof Peter Bower,
- General practice
  - Prof Stephen Campbell,
- Interface / informatics with the wider health system
  - Prof Iain Buchan.

MATRiC PCPS – resources

- Academic time
- Full time Project Manager;
- Full time secretary;
- Communications secretary;
- Facilitator for patient involvement/engagement;
- Four 4 year PhD studentships;
- 8 research assistants for research themes (plus one as core support);
- Funding for working with industry partners

MATRiC PCPS – Medication safety theme

Aims

• To develop an integrated safety management system (SMS) covering the drug use process (prescribing, dispensing and administration)
• To examine its potential to reduce errors associated with medication use in primary care;
• To explore how the prescribing, dispensing and administration of medicines within, and between, healthcare organisations can be improved,
• To produce indicators to monitor effectiveness;
• To test the viability and effectiveness of implementing the SMS using these indicators.
• To integrate with the other research themes through addressing polypharmacy and prescribing across the interface.

MATRiC PCPS – Multimorbidity theme

• Patients with multimorbidity in primary care are potentially at greatest risk in terms of patient safety issues.

• The aim of this theme is to identify, develop and evaluate patient- and carer-oriented interventions to minimise safety failures in patients with multimorbidity.

• This will be achieved by enhancing patients' involvement and capacity to manage risk themselves and through improved care planning, monitoring, evaluation and feedback of patient perspectives on safety to health care professionals and organisations.

MATRiC PCPS – Safety improvement theme

The overall strategy and aim is to build on existing research excellence, which is directly or indirectly related to patient safety, and apply it to drive forward improvements in patient safety to keep patients safe in their interactions with general practice and wider primary health care.

We shall define, develop and test: methodological approaches to measuring clinical care safety; organisational safety improvement indicators and accreditation criteria; methods to improve diagnosis for delayed and missed diagnoses; simulation laboratories for general practice; educational interventions to improve the role of patients in reducing harm.

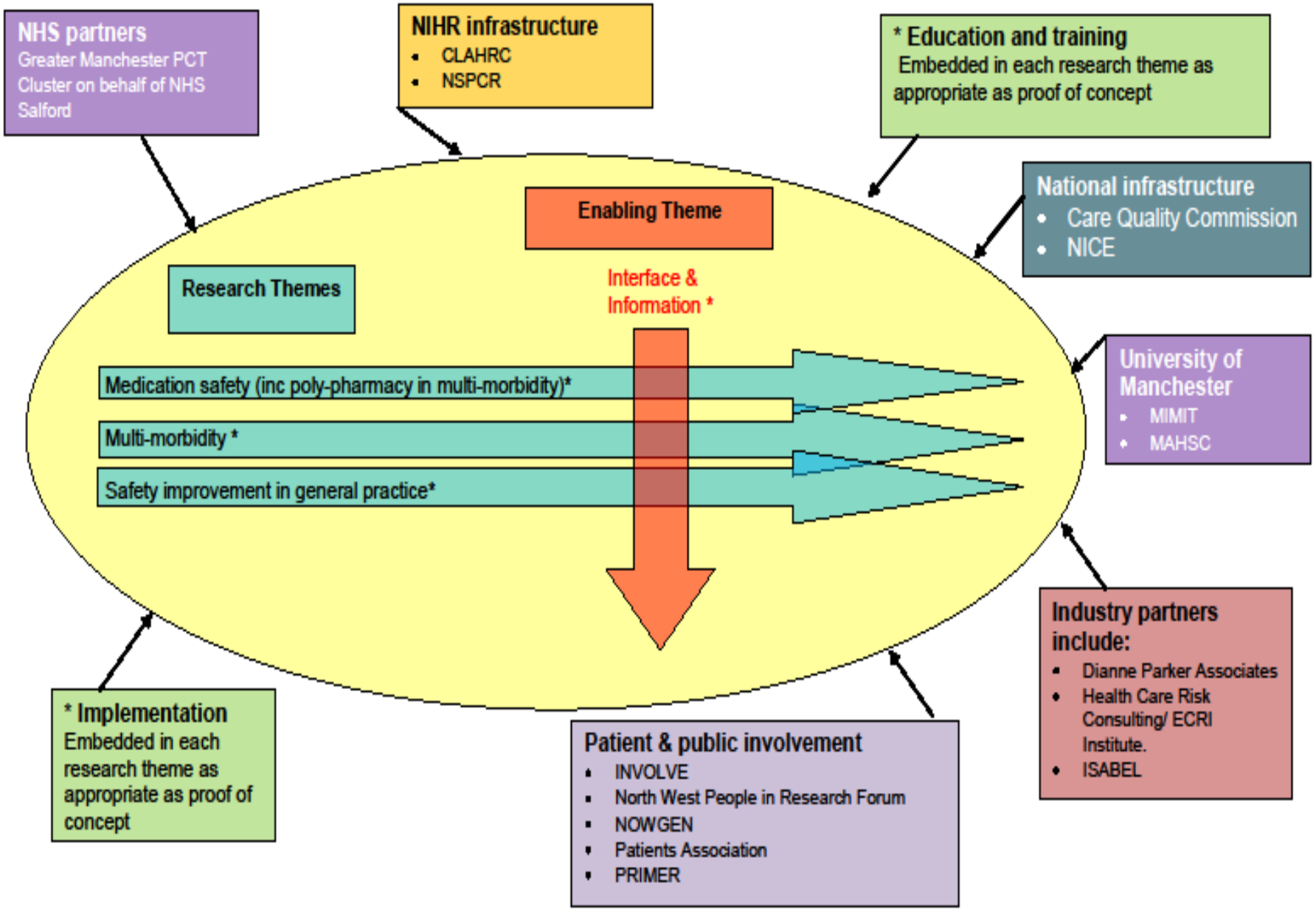
MATRiC PCPS – interface with the wider health system

This enabling theme will:

• Work across the Centre to identify the information systems requirements for both understanding patient safety and influencing decisions for greater safety in local NHS health systems;

• Establish a state-of-the-art patient safety information system and experimental platform in NHS Salford;

• Demonstrate the potential for information systems to create locally-relevant patient safety understanding and improvement, interfacing the different contexts of care.



Manchester Translational Research Centre for Primary Care Patient Safety (MATRiC-PCPS)

Summary

- Exciting times for patient safety research in general practice in the UK
- Over the next 5 years there is considerable potential to develop effective evidence-based approaches to improving patient safety through:
  - The NIHR SPCR Patient Safety Toolkit project
  - NIHR MATRiC PCPS