

PATIENT SAFETY PROJECT

Due Date: Last week of Clerkship

During your 2-week inpatient block, you are required to complete one Patient Safety Project. Choose one patient that you have followed in the hospital and complete the exercise by responding to the points listed on the Patient Safety sheet. The purpose is to identify factors that make this patient vulnerable to medical errors during their care. The exercise is designed to reinforce the material that was covered in the “Patient Safety” presentation that you received at the beginning of the Clerkship.

The sheet is divided into three sections as outlined below.

The first section lists possible ‘Patient Vulnerability Factors.’ Under each heading (for example ‘Communication’) mark any vulnerabilities that apply to this patient (for example, patient speaks little English, patient has low income and has no prescription coverage).

The second section lists ‘Process Vulnerabilities.’ Think about the processes of care that this patient is or will be undergoing (such as medications, investigations, consultations, follow-up) and use the headings given in this section to list any vulnerable processes that are involved. For example, patient is being started on Coumadin, which requires close monitoring of INR and dosage adjustment.

In the final section, ‘Analysis of Risk’, we ask you to choose the one care process that you think is most vulnerable (i.e., most likely to result in harm for the patient) and explain how the patient factors that you identified increase the risk of errors in this process (for example, the patient has difficulty with transportation so may miss his follow-up appointments). Finally, describe what you think could be done to reduce the risk of errors and/or harm. More credit will be given for solutions that involve system changes (e.g., develop a system for tracking Coumadin patients and reminding them when their INR is due) as opposed to behavioral changes (e.g., explain to the patient how important it is to get his INR checked).

Please review the Example given below.

If you have questions, write to Dr. R Singh at rs10@buffalo.edu

Note: Do not write the patient’s name on the sheet or identify the hospital or healthcare providers involved in their care.

3rd Year Family Medicine Clerkship Patient Safety Project

Student's Name: _____

Due: Last week of Clerkship

Brief Patient Details:

Patient's Age _____

PATIENT VULNERABILITY FACTORS

Certain patient factors can increase the risk of errors. Check the relevant boxes below and add any pertinent details under 'Comments'.

Communication:

Language

- Good English
- Poor English
- No English

Hearing

- Good hearing
- Poor hearing
- No hearing

Speech

- Clear speech
- Unclear speech
- Not comprehensible

Comments:

Cognitive:

Orientation

- x3
- x2
- x1
- x0

Memory (3 object recall)

- 3
- 2
- 1
- 0

Concentration (serial 7's

- 4-5
or 'world' backwards)
- 2-3
- 0-1

Comments:

Education:

- College or above
- High School or Equivalency
- Did not complete high school
- Less than 8th grade

Comments:

Financial:

Employment

- Employed
- Unemployed
- Soc.Sec.
- Disability

Insurance

- Commercial
- Medicare
- Medicaid
- None

Medication coverage

- Full
- Limited
- None

Comments:

Cultural:

- Anglo American
- African American
- Latin American
- Native American
- Other _____

Specific cultural beliefs that can impact care:
(beware of stereotypes)

Access:

Transportation

- No difficulties
- Difficulties: _____

Availability of local healthcare services

- Good
- Limited: _____

PROCESS VULNERABILITY FACTORS

Patient care in the hospital and upon discharge involves multiple complex steps/processes. Aspects of care that are most vulnerable to error include: those that involve complex instructions; those where coordination between multiple parties is required; and those that require close monitoring and/or accurate dosing. Use the following section to identify the points of vulnerability in this patient's care.

High-Risk Medications _____

Multiple / Complex medications _____

Complex investigations (require patient to follow instructions) _____

Consultations _____

Follow-up _____

Monitoring _____

3rd Year Family Medicine Clerkship

Patient Safety Project

EXAMPLE

Brief Patient Details:

Patient's Age 76

76 year old Latino male patient admitted because of left sided deep venous thrombosis (DVT). Started on heparin. Will be discharged home on Coumadin. Also has hypertension, diabetes, and smokes cigarettes.

PATIENT VULNERABILITY FACTORS

Certain patient factors can increase the risk of errors. Check the relevant boxes below and add any pertinent details under 'Comments'.

Communication:

Language

- Good English
 Poor English
 No English

Hearing

- Good hearing
 Poor hearing
 No hearing

Speech

- Clear speech
 Unclear speech
 Not comprehensible

Comments: No interpreter was available at the time of assessment

Cognitive:

Orientation

- x3
 x2
 x1
 x0

Memory (3 object recall)

- 3
 2
 1
 0

Concentration (serial 7's

- or 'world' backwards)
 4-5
 2-3
 0-1

Comments: Cognition could not be reliably assessed due to language difficulty

Education:

- College or above
 High School or Equivalency
 Did not complete high school
 Less than 8th grade

Comments: _____

Financial:

Employment

- Employed
 Unemployed
 Soc.Sec.
 Disability

Insurance

- Commercial
 Medicare
 Medicaid
 None

Medication coverage

- Full
 Limited
 None

Comments: _____

Cultural:

- Anglo American
 African American

Specific cultural beliefs that can impact care:
(beware of stereotypes)

- Latino American
- Native American
- Other _____

This patient tends to view illness as a
sign of weakness

Access:

- Transportation
 No difficulties
 Difficulties: Cannot drive
Has to take 2 different
buses to reach clinic.

- Availability of local healthcare services
 Good
 Limited: _____

PROCESS VULNERABILITY FACTORS

Patient care in the hospital and upon discharge involves multiple complex steps/processes. Aspects of care that are most vulnerable to error include: those that involve complex instructions; those where coordination between multiple parties is required; and those that require close monitoring and/or accurate dosing. Use the following section to identify the points of vulnerability in this patient's care.

High-Risk Medications: Coumadin can cause bleeding if overdosed. INR needs to be closely
monitored – requires regular blood draws and follow-up of results.

Multiple / Complex medications: He will be on a total of 7 different medications at various different
times during the day

Complex investigations (require patient to follow instructions) _____

Consultations _____

Follow-up Patient needs to follow up with PMD within 1 week

Monitoring: INR needs to be monitored (as above)

ANALYSIS OF RISK

Which *one* of the ‘vulnerable processes’ that you identified in the previous section do you believe poses the biggest threat to this patient? (i.e., has the most potential to result in harm?)

Coumadin poses the greatest risk due to dangers of overdosing (bleeding) or

underdosing (recurrent DVT/PE)

Now, look through the ‘Patient Vulnerability Factors’ that you identified earlier and explain how these factors may make this process more prone to error.

Poor English skills: He may have difficulty understanding the instructions for Coumadin dosing (especially if dosage is changed frequently)

Financial: Patient has only Medicare for insurance. Therefore, he has to pay for his own medications, which are very expensive. Since he has a low income (Social Security) the Coumadin (about \$30 per month) may be difficult to afford

Cultural: Due to his cultural beliefs, he may tend to underplay his problems. When his symptoms resolve he may discontinue his medications without seeking medical advice.

Transportation: Access to the clinic is difficult for this patient. He is at risk for missing his INR checks.

What strategies would you suggest to make this process safer for this patient and similar patients?

Develop a system in the clinic to remind patients when their INR is due.

Choose a pharmacy that can label the medicine bottles in Spanish.

Arrange a visiting nurse (preferably a member of the same ethnic group) to check the patient’s INR and monitor medication compliance.