



Simpatie Project

CPME's role in the project

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Simpatie project - CPME's role in the project

What is the Simpatie Project?

The SIMPATIE-project, in which the CPME is one of the main partners, was among the accepted proposals for co-financing in the call for proposals from the European Commission on 'Public Health – 2004' (OJ 2004/C52, 27 February 2004).

SImPatIE is an acronym and stands for Safety Improvement for Patients In Europe, which directly indicates its main objective. More specifically the goal of the project is to use a European-wide network of organizations, experts, professionals and other stakeholders to establish within two years a common European set of vocabulary, indicators, internal and external instruments for improvement of safety in health care.

The partners in the project are:

- CBO: Dutch Institute for Quality Improvement (*project leader, lead partner wp 6 + 8*)
- Council of Europe (*lead partner wp 3*)
- CPME: Standing Committee of European Doctors (*lead partner wp 7*)
- ESQH: European Society for Quality in Healthcare (*lead partner wp 2 + 4*)
- HAS: the French High Authority of Health (*lead partner wp 5*)
- HOPE: Standing Committee of the Hospitals of the European Union
- LMCA: the UK Long-term Medical Conditions Alliance

The project officially started on 15 February 2005 and will last two years. The project is divided in 8 so called Work Packages:

- Project management (wp 1)
- Mapping exercise (wp 2)
- Recommendation on safety and quality (wp 3)
- Toolbox 1: Vocabulary and Indicators (wp 4)
- Toolbox 2: External tools (wp 5)
- Toolbox 3: Internal auditing tools (wp 6)
- Strategy exercise (wp 7)
- Dissemination (wp 8)

All the project partners are actively involved in work package 1 which is called project management. For this work package a project secretariat and a steering committee to manage the project are established. The project secretariat is located at CBO and is responsible for the administrative and financial management of the project. The steering committee is composed of representatives from all project partners and meets regularly during the project to discuss the execution of the work packages and the production of deliverables.

Why this project?

Patient safety is recognized internationally as a health (quality) issue. Research shows that the level of harm to citizens and the costs to the health sector and society at large is considerable. Preventing adverse events has the potential to increase quality of life and safe costs. Increasing patient mobility across Europe has stimulated the international debate on patient safety and has helped put the issue on the European agenda.

However, for the moment there is no European vocabulary on which an agreed upon policy towards patient safety can be developed. The Simpatie project aims to provide policy makers and the public with an expert advise on such a patient safety vocabulary and policies.

Work packages

The following information will be produced by the work packages 2-6:

- Work package 2 will provide a systematic overview of activities related to patient safety in European countries, e.g. legislation, regulation and actions. This information will be made accessible through web based communication. This so-called mapping exercise is actually the main work package of the project and encompasses 18 months, with an end date in August 2006.
- Work package 3 will provide a framework where the “Council of Europe Recommendations on prevention of adverse events” is translated into practical improvement tools at the institutional level. In doing so this work package will consider the application of the Council of Europe recommendations to the tasks of work packages 4-6. This work package is already finished. Its end was marked by a [Council of Europe Conference on patient safety in Warsaw](#), where the results were presented.
- Work package 4 will provide a vocabulary (set of definitions) and a set of system and organization indicators or outcome measures related to patient safety. The activities for the work packages 4-6 are scheduled to start in September 2005, and they will finish just before the start of the CPME work package in June 2006.
- Work package 5 will provide patient safety recommendations for external evaluation of health services, including selected instruments that can be used for improvement.
- Work package 6 will provide patient safety recommendations for internal evaluation of health services, including a set of instruments that can be used for improvement.

CPME lead partner in work package ‘strategy exercise’

CPME is lead partner in work package 7 called ‘The Strategy Exercise’, which will start in June 2006 and which will last until December 2006.

The objective of this strategy exercise is to reach expert consensus on a strategy framework for patient safety that incorporates the information from all previous work packages. The aim is to develop a strategy framework that can be modified to fit individual health care systems and organizations but that contains agreed components.

The deliverables (=output) formulated for the strategy exercise work package are:

- the organization of a consensus conference on a strategy framework for Patient Safety
- a publication on the strategy framework
- making the strategy framework available via a web based resource.
- to disseminate the strategy framework to as wide a public as possible

A special website for the Simpatie project will be online as of August 2005 and used by the previous work packages. Dissemination is actually the objective of work package 8, but the basis for it will be laid by our work package.

In more concrete terms the strategy exercise will analyze the information produced by the work packages 2-6 to see its practical usability for a strategy framework on patient safety. As said CPME's leading role in the project will only start in June 2006. However, from the above it becomes clear that it is very important for CPME to follow the activities of the other work packages in the project closely. What's more, CPME will be demanded to provide input for the different work packages at several points during the project. This means that CPME will consult its members on several occasions in the coming two years for the Simpatie project.

Concrete involvement from CPME members for project

The Simpatie project aims to provide expert advice on patient safety in Europe. In order to do so it aims to bring together patient safety experts throughout Europe in a network. It is important that CPME is well represented in this European patient safety network. The outcomes of the project will be communicated back to the members of the network and the public in general.

The following contributions are expected from CPME during the project:

- During the whole project:

The project will make use of an interactive website, which will contain the database with patient safety information. Therefore in general and as an addition to what follows contributions can be made at any moment. The website will be launched during the first phase of the project.

- Work package 2 (mapping exercise):

A first meeting of experts has taken place on 3 April 2005 in Luxembourg. During this meeting a first concept of the framework for the patient safety database was discussed. Vice-president Dr. Jesper Poulsen is part of the group of experts. This framework is still under development.

As soon as the framework is ready, CPME members will be asked to provide input for the mapping exercise. This input should contain patient safety activities and initiatives in the respective countries.

- Work package 3:

The Council of Europe presented its 'Recommendations on the prevention of adverse events' on a Conference in Warsaw on 14&15 April 2005. Vice-president Dr. Jesper Poulsen was there to represent the Simpatie project on behalf of CPME. The further elaboration of these recommendations will take place in the mapping exercise (wp 2).

- Work package 4:
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- Although CPME is not directly involved in this work package that prepares for the work packages 5 and 6 on external and internal instruments to improve patient safety, CPME members' advice will be asked when our specific input is needed.
- Work package 5:
CPME members will be asked for input on professional aspects relating to external auditing to improve patient safety.
- Work package 6:
CPME members will be asked to represent the professional's view in discussing instruments and approaches that are used in health care organizations to improve patient safety.
- Work package 7:
CPME members will be asked to assist in the organization and promotion of the consensus conference to develop a strategy framework.

Related initiatives

Two other initiatives related to patient safety are worth mentioning here:

- The European Marquis project, which is an acronym of 'Methods of Assessing Response to Quality Improvement Strategies'. Its aim is to come to a first basis to assess the need and the development of formal, quality procedures at EU level for primary and secondary care institutions.
- The WHO Europe questionnaire on Patient Safety. The WHO has developed a questionnaire on patient safety and will distribute this questionnaire to national policy makers in Europe to gain insight in activities on patient safety in Europe. CPME has commented on the draft version of the questionnaire.

The Simpatie project has established close links with the other initiatives. A joint WHO Europe, Marquis and Simpatie Conference will be organized on 5 and 6 September 2005 in Copenhagen, to foster coordination between the different projects.

Outcomes of the project

CPME was the main partner to organize the Patient Safety Conference in Luxembourg on 4 and 5 April 2005. The Luxembourg Declaration on Patient Safety has given patient safety a clear place on the European agenda. This project builds on this agenda by providing policy makers, management and health care professionals information on existing legislation, regulation and activities throughout Europe.

The website containing the strategy framework on patient safety will be a remaining outcome of the project. The web based database can be of help to all interested parties in Europe. Together they can function as a tool to continue the debate on the best strategies to ensure patient safety.