

Ethical Principles to Enhance Patient Safety



AKTIONSBÜNDNIS
PATIENTENSICHERHEIT

PREAMBLE

The Aktionsbündnis Patientensicherheit e.V. (German Coalition for Patient Safety - APS) stands for enhancing patient safety and would like to encourage every individual and organisation to take the initiative. To this end, APS has drawn up **Principles to Enhance Patient Safety**. These Principles are intended for all individuals and institutions that are directly or indirectly involved in patient care and, therefore, have an impact on patient safety.

The Principles are intended to provide support for healthcare professionals with regard to their responsibility for patient safety in their individual, professional and institutional activities. They provide guidance on which fundamental requirements and expectations are relevant for patient safety, and on how individuals should direct their actions in their particular area of work and responsibility, when it comes to achieving safe patient care.

APS is aware of the fact that these principles cannot constitute any concrete guidelines for action. Furthermore, it is aware that not everyone in every situation will be able to do justice fully to each of them. APS trusts in the fact that all stakeholders in the healthcare system will use these principles as a benchmark for their own actions and do everything they can to uphold them to enhance patient safety.

As patient safety is largely dependent on good cooperation, these **Principles to Enhance Patient Safety** also reflect the joint responsibility of the stakeholders involved in patient care.

The German Coalition for Patient Safety undertakes to regularly review these principles and encourage discussion amongst the stakeholders. The members are, therefore, kindly invited to submit suggestions for their review at any time to the Board.

The Ethical Principles to Enhance Patient Safety

1. We focus our actions primarily on the well-being of patients.
2. We promote autonomy and responsibility that patients can assume, within the bounds of their possibilities, for their own safe care.
3. We work together trustingly and constructively and make our own individual contribution to patient safety.
4. We share any information at our disposal that can contribute to patient safety.
5. We acquire our competences in terms of patient safety as early on as possible and continuously enhance them.
6. We see ourselves as being responsible and actively strive to identify and communicate risks for patient care, and tailor our own actions accordingly.
7. When we assume managerial responsibility, we elaborate those structures and procedures which are necessary for safe patient care. We continue to develop and monitor them. We make the necessary resources available.



EXPLANATORY COMMENTS ON THE ETHICAL PRINCIPLES

1. We focus our actions primarily on the well-being of patients.

This includes esteem-based and respectful encounters with patients. Any self-interests, irrespective of their nature, do not take precedence over the interests and well-being of patients. All indications for medical measures are governed by this primacy.

If errors occur, we focus on avoiding any further harm, being honest with patients and showing personal sympathy.

2. We promote autonomy and responsibility that patients can assume, within the bounds of their possibilities, for their own safe care.

This involves sharing information in a comprehensible manner, giving easily understandable answers to questions and actively overcoming any uncertainties that patients and their family members may have. Patients must be involved, if possible, in all decisions about their health.

3. We work together trustingly and constructively and make our own individual contribution to patient safety.

Every professional competence is to be treated with respect. The competences of professional groups and other stakeholders are utilised irrespective of the holder's professional position. Decisions are also taken in situ by competent professionals and not just by hierarchical superiors. This also means that recourse is made to the expertise of all professional groups that can contribute to enhanced patient safety. Likewise, this implies that all stakeholders are to bear in mind the overall situation of the patient and the requirements of his/her care.

Trust means that the broaching of errors and risks is understood and encouraged as an intervention on behalf of the safety of individual patients.

4. We share any information at our disposal that can contribute to patient safety.

Besides information on individual patients, we do our very best to pass on general information on risks and types of errors, and on how to avoid them. Consequently, we share the information on risks and error types in such a way that other people can understand the procedure and can use the information. We anonymise any data that are passed on to safeguard the patient's right to protection of his/her personal details.

Standard operating procedures and routines are regularly reviewed to identify any weaknesses and potential for errors. In this context, information, communication and the adjustment of operating procedures and routines on a broad basis are particularly important.

5. We acquire our competences in terms of patient safety as early on as possible and continue to regularly develop them.

Whether in training programmes, in basic or advanced degree programmes in the healthcare system – the topic of patient safety is addressed early on as a core competence for healthcare professionals. Healthcare professionals continue to build on their competences in further and advanced training schemes. To this end, they actively call for schemes of this nature and are given the opportunity to participate in them.

6. We see ourselves as being responsible and actively strive to identify and communicate the risks for patient care, and tailor our actions accordingly.

To err is human and, for that reason, we continuously examine where there are risks in care, where errors and harm happen and how they can be avoided. Even during ongoing periods of success, attentiveness and critical reflection must not slacken.

Framework conditions must be created and a culture must be promoted that encourages talking about and identifying errors without fear or punishment. Open communication about errors and harm are the key to learning from them and taking steps to avoid them in future.

7. When we assume managerial responsibility, we elaborate those structures and procedures that are necessary for safe patient care. We continue to develop and monitor them. We make the necessary resources available.

Placing patient safety at the heart of safe care is the expression of an open, learning and proactive safety culture. Consequently, patient safety is perceived and actively put into practice as a managerial and executive task along with the required framework conditions. Healthcare professionals are protected from having to make errors. To this end, aspects of the organisation, workplace, technology, team, social relationships and work activities are taken into account along with the human characteristics.

The responsible parties create structures which facilitate a flexible, rapid and competent response to errors and problems. In this way, they promote the necessary resilience to errors. Simplifying assumptions and interpretations in terms of errors and problems in care are viewed with the necessary degree of differentiation and the complexity of the system is borne in mind.

German Coalition for Patient Safety (APS)

APS is a network that is dedicated to safe health care in Germany. Healthcare professionals from all professions and institutions, patient organisations and interested parties have come together to share responsibility for coming up with concrete ways of enhancing patient safety in everyday medical and nursing care. They are available as recommendations for action to all stakeholders in the healthcare system.

APS stands for

- Credibility through independence
- Bundling of professional competences
- Interdisciplinary and multi-professional networking
- The principle: from practice for practice

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Am Zirkus 2, 10117 Berlin
www.aps-ev.de

Editorial Team

Hedwig François-Kettner, Prof. em. Dr. Uvo Hölscher, Dr. Barbara Hoffmann,
Prof. Dr. Christoph Scholz, Conny Wiebe-Franzen M.A.

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