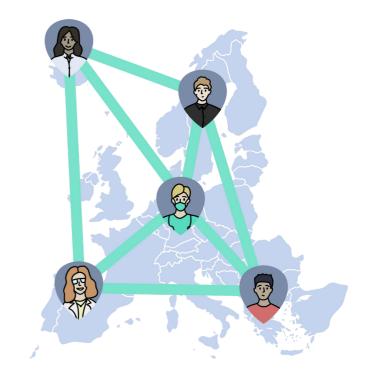


**COST Action 19113 lead by the ERNST Consortium** 

This COST Action (CA) is lead by the ERNST Consortium which involves 37 countries, 29 from the European Union and 8 from COST Observer countries from Asia, North America and Latin America. This CA started on September 15<sup>th</sup>, 2020.

This CA seeks to open a scientific, technical, and social debate in order to share knowledge and experiences with the aim of contributing to patient safety. We want to achieve legal, technical, and social changes to install a pro-active safety culture, convinced that when professionals feel supported and capable of facing their tasks, the quality in healthcare increases. ERNST pursues to enhance the resilience of the healthcare workforces in stressful situations.









# COST ACTION 19113 COST ACTION 19113 ERNST The European Researchers' Network Working on Second Victims

This CA is organized into 4 working groups



**WG1 - Network Promotion**. Networking, management, dissemination issues, assessment of work plan and sustainability

WG2 - Review and description of the State-of-the-Art. Review and disseminate conceptualization, evidence-based interventions, metrics and instruments, including the experiences from other industries

**WG3 - Making it happen.** Make feasible interventions, train professionals, and implement cultural, legal or educational changes

**WG4 - Facilitators and barriers.** Explore and facilitate alternatives to overcome taboos, or obstacles facilitating collaboration among stakeholders





of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

# Coordination

# **Management Committee:**

# 3 meetings

- September 15<sup>th</sup>, 2020
- April 20<sup>th</sup>, 2021
- October 21st, 2021

#### Main agreements:

• Approbation of new members, work plans and budgets.

# **Core Group:**

# 2 meetings

- September 30<sup>th</sup>, 2021
- November 5<sup>th</sup>, 2021

#### Main agreements:

 proposal of activities for each WG, recommendations and proposals for the preparation of the second budget.







of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

# Coordination

# WGs meetings:

# 4 meetings

- February 4<sup>th</sup>, 2021
- March, 25<sup>th</sup>, 2021
- April 27<sup>th</sup>, 2021
- July 6<sup>th</sup>, 2021

#### Main agreements:

Proposals to increase the CA19113
 visibility. Actions to involve
 Healthcare Policymakers. Agreement
 about studies regarding psychology
 security in training of future
 generations healthcare professionals.

# Other online meetings:

# 9+12 meetings

- In small groups involving according to the topic the Science Communication Manager, Vice-Chair, leaders of the Training School, Scientific Term-Short Mission, and WGs and the Chair.
- Also, several meetings with hired companies to monitor the advances of tasks.







of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

# Dissemination and Communication

# Website:

The website has been developed. New pages have been included to introduce materials such as a draft of Manual for Training.









of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

# Dissemination and Communication

# 2 International conferences:

**ERNST International Forum:** 

- March 16<sup>th</sup>-18<sup>th</sup>, 2021
- October 19<sup>th</sup>-20<sup>th</sup>, 2021

A total of **2,213** registered **participants** from **36 countries** have participated in the International FORUMs organized by this CA.







of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

# Dissemination and Communication

# 1 International Workshop:

• April 26<sup>th</sup>, 2021

Speakers: Albert Wu (Johns Hopkings Bloomberg Scool of Public Health, USA), Stephen Prat and Jackie Evuoso (Beth Israel Deaconess Medical Center of Boston, USA), Jose Mira (FISABIO, UMH, Spain). Moderators: Lucia Prihodova (Ireland), Sandra Buttigieg (Malta) and Julia Prentice (USA).

# Publications:

Manuscripts have been sent to be assessed in scientific journals, entitled:

- Interventions in Europe to support healthcare professionals in the aftermath of safety events.
- Reinforcing resilience of the healthcare workforce during the COVID-19 pandemic. ERNST Study.

# 1 Communications at Conferences:

Presented at the 35th Annual Conference of the European Health Psychology Society entitled:

 Interventions in Europe to support healthcare professionals after the occurrence of adverse events.







of the activities done during the First Grant Period (November 1st, 2020 until October 31<sup>st</sup>, 2021).

> **Dissemination and Communication**

Participation in international webinars organized by WHO, ISQua, Tartu University and Healthcare ministries in Europe & Latin America.

Video about CA19113 targets & activities:







of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

# Dissemination and Communication

# 4 Podcasts:

Materials to be used during the Training School editions and also for professionals' training sessions.



International blogs contribution: (NoA and Newsletter ERNST)

# 6 Virtual Grants:

Scholarship holders from

- Israel,
- Malta.
- Romania,
- Slovakia and
- Spain

have developed tasks linked with the targets of the WGs.







of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

# Dissemination and Communication

# **215** Registered participants

involved in the training School: the first edition was held on September 21<sup>st</sup> and 22<sup>nd</sup> 2021.

Four webinars and 2 sessions involving young researchers explaining their projects were developed.

# 4 Studies initiated in this Period:

The impact of emotional support of healthcare professionals, students and organizations coping on COVID-19, SARS-CoV, and MERS pandemics PROSPERO 2021 CRD42021262837.

Psychological safety among students and trainees in the healthcare settings.

Second victims in sectors other than health.

The use of "second victim" term in sectors other than health.

#### Other collaborations:

 This CA has involved in the NoA initiative lead by COST Association for a better response to the challenge of the COVID-19 pandemic.







of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

**Budget & Execution** 

71.023€

COST BUDGET assigned to COST ACTION 19113.

67.978€

invested in COST ACTION 19113 activities.

95%

of assigned BUDGET executed.







of the activities done during the First Grant Period (November 1<sup>st</sup>, 2020 until October 31<sup>st</sup>, 2021).

Working Groups Objectives & Targets

WG1 - Network Promotion.

WG2 - Review and description of the State-of-the-Art.

WG3 - Making it happen.

WG4 - Facilitators and barriers.







#### WG1 - Network Promotion.

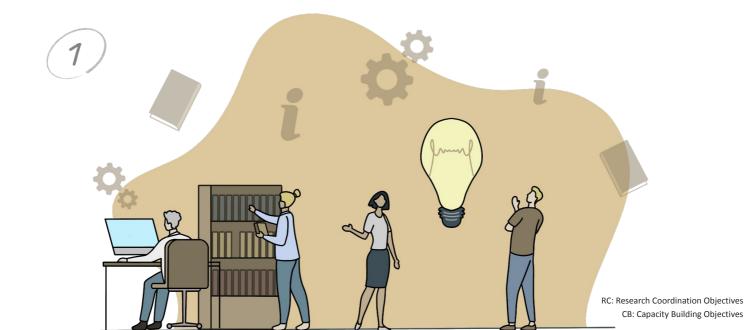
Networking, management, dissemination issues, assessment of work plan and sustainability

#### **Objectives:**

RC3. Raising general awareness of the impact of adverse events on healthcare professionals (considering gender differences) and their consequences in personal, professional, social, legal, economic, and labor terms.

RC5. Understanding of the causes of clinical errors disseminating the results of the research and experiences to stakeholders (patient associations, professional societies, trade unions, healthcare manager associations, policy makers) and the general public.

**CB3.** To provide a platform to develop a research and implementation agenda involving relevant stakeholders in the healthcare context to promote effective solutions and facilitate discussion of the legal, ethical, social, and organizational issues.







# WG2 - Review and description of the State-of-the-Art

Review and disseminate conceptualization, evidence-based interventions, metrics and instruments, including the experiences from other industries

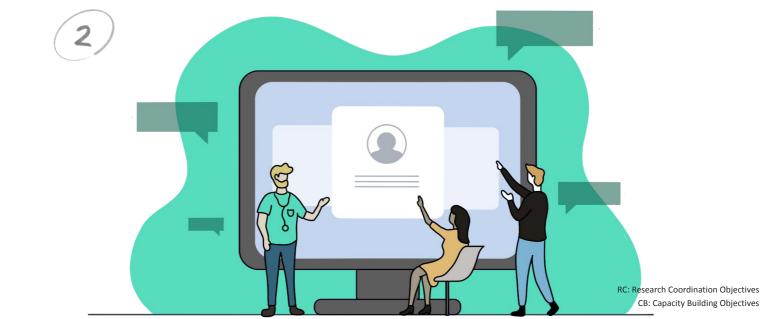
#### **Objectives:**

**RC1.** Encouraging discussion of the meaning of the fourth criterion (Quadruple Aim) and its implications for healthcare organizations.

**RC2.** Further developing the theoretical conceptualization of the second victim phenomenon and developing a common understanding of its definition.

**RC9.** Learning to tackle with the consequences of the SV phenomenon by promoting a debate in healthcare to learn from other industries.

**CB2.** To bridge management, social, legal, educational, and clinical expertise to further develop the theoretical conceptualization of the second victim phenomenon.







# WG3 - Making it happen.

Make feasible interventions, train professionals, and implement cultural, legal or educational changes

#### **Objectives:**

**RC6.** Introducing new metrics on the system level that should be used to improve health workforce policy.

**RC8.** Agreeing what to do after occurring adverse events, sharing knowledge about research evidence and methods to tackle with this phenomenon, progressing beyond the state of the art and promoting innovation.

**CB4.** To create a network for the integration of fragmented initiatives, identifying more effective measures, applying lessons learned and to foster knowledge exchange and dissemination of research results.

**CB5.** To encourage the development of proposals to support second victims by overcoming the current fragmentation of rules, approaches, and policies, including experiences from other industries.







#### WG4 - Facilitators and barriers.

Explore and facilitate alternatives to overcome taboos, or obstacles facilitating collaboration among stakeholders

#### **Objectives:**

RC4. Achieving changes in rules and regulations facilitating discussion of the legal, ethical, and organizational gaps while promoting a common understanding of factors underlying the interventions designed to support second victims.

**RC7.** Encouraging inclusion of the consequences of mistakes on care providers and the implications for health sciences in the field studies curricula.

**CB1.** To lead a debate to promote a culture of transparency and legal certainty as a contribution to furthering the wellbeing of frontline medical staff as part of its commitment to quality assurance.

