



University
of Stavanger

GUNNAR TSCHUDI BONDEVIK, University of Bergen, Norway

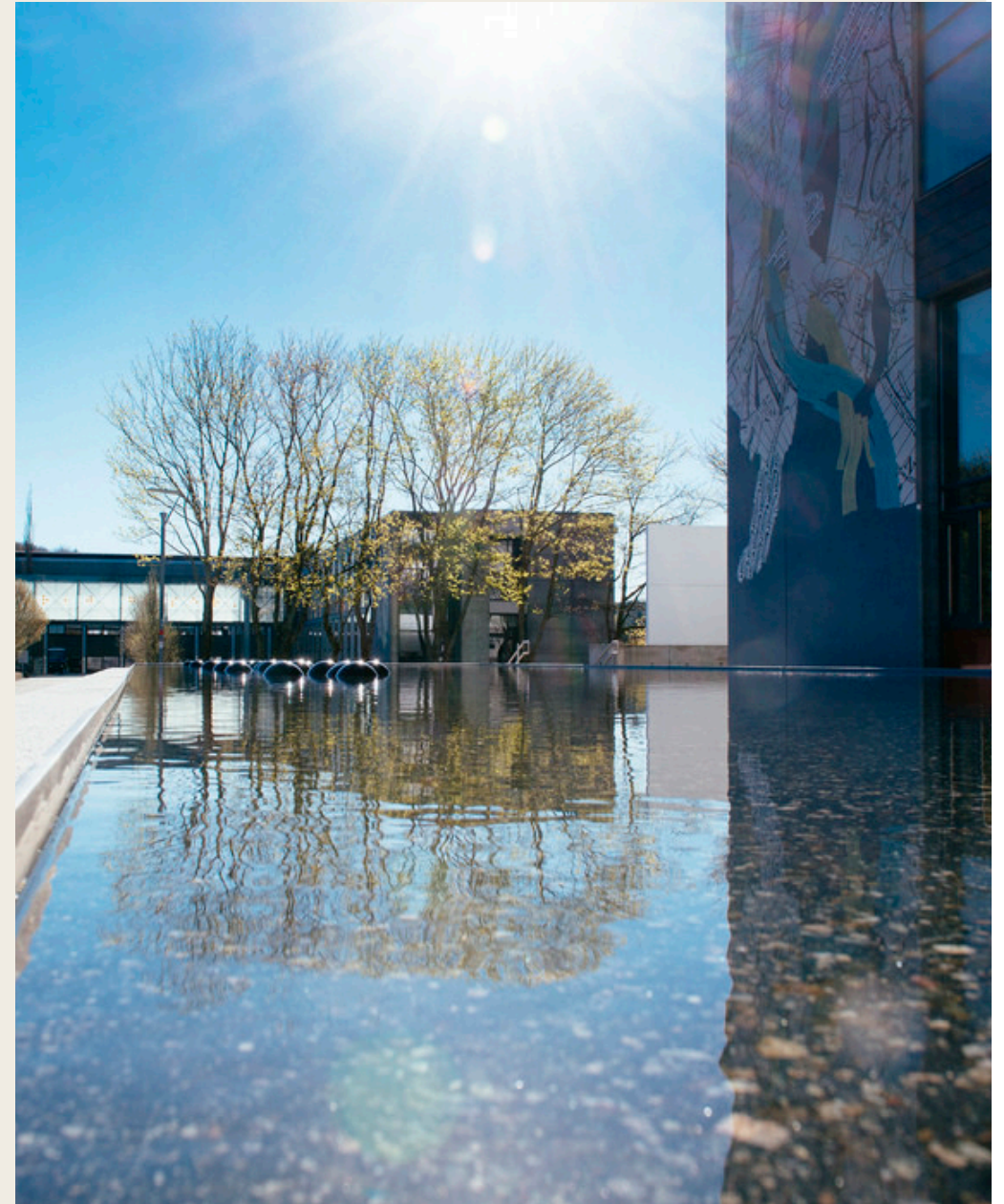
MALIN KNUTSEN GLETTE, Western Norway University of Applied Sciences, Haugesund, Norway

SIRI WIIG, University of Stavanger, Norway

Workshop: Quality and safety in primary care

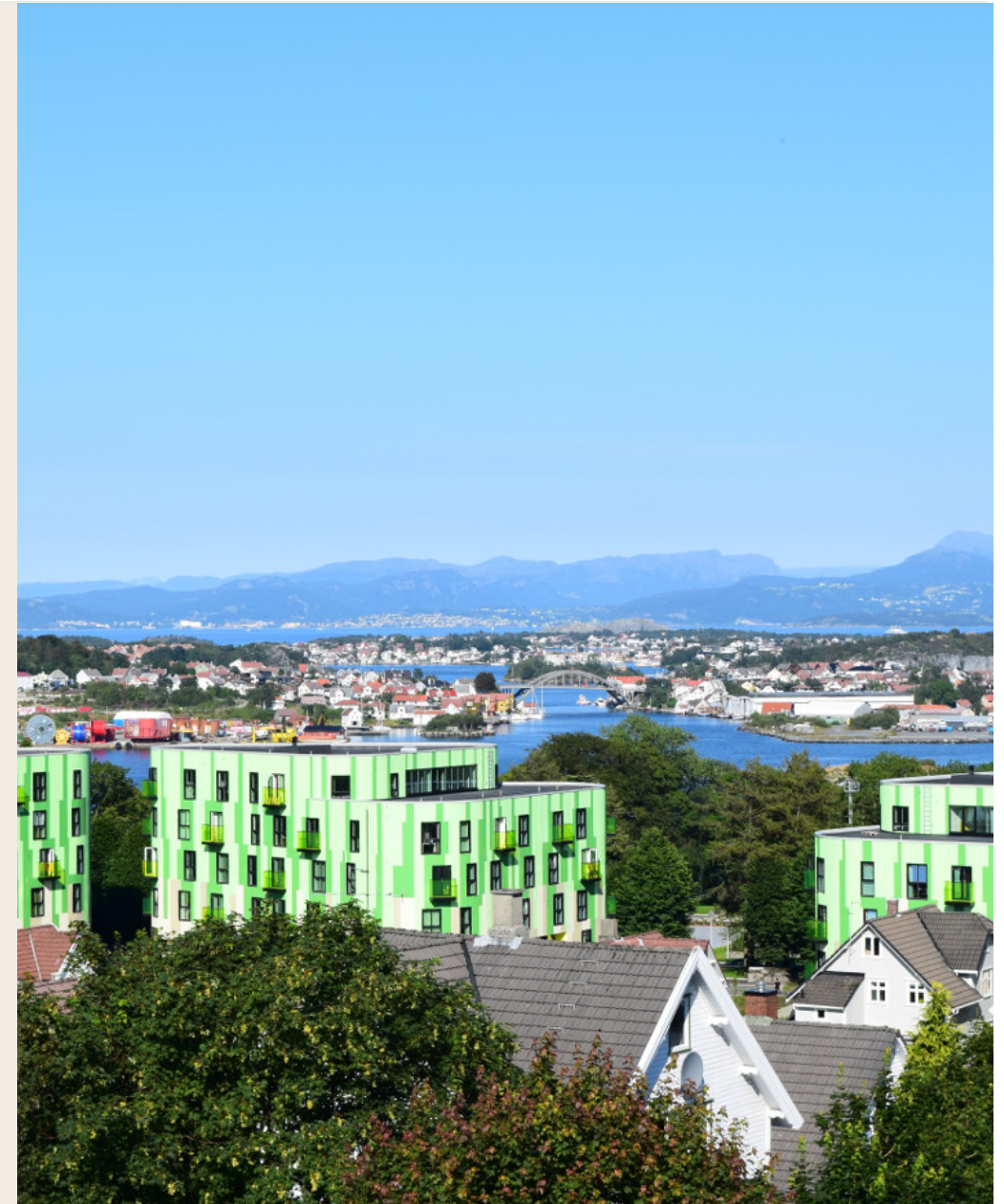
Agenda

- Three short presentations focusing on different parts of primary care and the challenges facing the work on quality and safety in this context
- Group discussions
- Summary



Presenters

- ***Gunnar Tschudi Bondevik***, Professor of General Practice, Department of Global public health and primary care, University of Bergen, & Uni Research Health, Bergen, Norway
- ***Malin Knutsen Glette***, PhD student in health and medicine, Department of Health, Western Norway University of Applied Sciences (Haugesund), Norway
- ***Siri Wiig***, Professor of Quality and Safety in Healthcare Systems, SHARE-Center for Resilience in Healthcare, Faculty of Health Sciences, University of Stavanger, Norway.



You will learn about:

- Patient safety culture in primary care context
- Doctors' decision making about hospital readmissions from the primary care perspective
- How managers in nursing homes and home care with limited resources and education in quality and safety improvement experience their work in this field



Group discussion



Group discussion

1. How do quality and safety work differ between primary and specialized healthcare?
2. What do we know about the differences and the role of context in quality and safety in primary care in the Nordic countries?
3. What are the particular challenges facing the research on quality and safety in primary care and how researchers need to address these? Are we facing any particular challenges in the Nordic countries?
4. What are the key topics for the Nordic research agenda on quality and safety and primary care?

SIRI WIIG, Professor of Quality and Safety in Healthcare Systems, SHARE-Center for Resilience in Healthcare, UiS

The SAFE-LEAD Primary Care project



Project info – SAFE-LEAD Primary Care

- **Title:** *Improving Quality and Safety in Primary Care-Implementing a Leadership Intervention in Nursing Homes and Homecare*
- **Funding:** HELSEVEL, Research project, The Research Council of Norway (RCN), UiS
- **Budget:** 22 mill NOK, 12 mill RCN
- **Project period:** 2016 –2021



SAFE-LEAD team – Researchers & co-researchers



Partners:

Norwegian:

Songdalen municipality (USHT)
Førde municipality (USHT)
Stavanger municipality (USHT)
Directorate of health v/Patient
ombudsman Vestfold

International:

Erasmus University, Nederland



Background

- Would you be happy for your parents to be primary care patients if service managers lacked the competence and means to ensure safe healthcare services?
- This is argued to be the current situation in the Norwegian primary care service.
- There is an urgent need for improved quality and safety competencies among leaders in homecare and nursing homes.

Meld. St. 26

(2014–2015)

Melding til Stortinget

Fremtidens primærhelsetjeneste
– nærhet og helhet

Meld. St. 11

(2014–2015)

Melding til Stortinget

Kvalitet og pasientsikkerhet 2013

Meld. St. 12

(2015–2016)

Melding til Stortinget

Kvalitet og pasientsikkerhet 2014

About the SAFE-LEAD project

- SAFE-LEAD will develop, test, and evaluate a leadership tool in Norwegian primary care
- The overall aim to build leadership competence in quality and safety among primary care managers.
- A leadership intervention is tested in different nursing homes and homecare contexts

Builds on results from an EU project (QUASER).



Primary objectives

1. Investigate the **influence of context** on the implementation of an evidence-based quality & safety leadership intervention
2. Test the effectiveness of the leadership intervention on **changes in knowledge, attitudes and practices** relating to quality and safety
3. **Develop theory** to guide implementation of future leadership interventions designed to improve the quality and safety in primary care



SAFE-LEAD

Quality and Safety in Primary Care

Managers in nursing homes and home care services lack effective tools for quality and safety improvement work.

SAFE-LEAD will address this need!

Objectives

- ❖ Develop and evaluate a research-based leadership guide for managers in primary care
- ❖ Increase leadership competence in quality and safety
- ❖ Explore the implications of the leadership guide on managers' and staffs' knowledge, attitudes, and practices
- ❖ Develop theory to guide implementation of future leadership interventions



Methods

- ❖ Four nursing homes and four home care services from 4-8 municipalities are included
- ❖ Survey, interviews, and observations are used to evaluate the leadership guide
- ❖ Comparative study of Norway and the Netherlands



SAFE-LEAD will increase primary care managers' quality and safety competence



University of
Stavanger



Centre for Development of
Institutional and Home Care Services



ERASMUS UNIVERSITEIT ROTTERDAM



Helseidrektoratet
Norwegian Directorate of Health



CITY OF STAVANGER



SONGDALEN
KOMMUNE



The Research Council
of Norway



Førde kommune

Phase 1 – pre-study to map study context

How do contextual factors influence quality and safety work in the Norwegian home care and nursing home settings?

Eline Ree, Terese Johannessen, Siri Wiig



Aim:

- Although many contextual factors can facilitate or impede managers' work with quality and safety, research on how these factors influences the their improvement efforts is scarce.
- Aim: to explore how primary care managers experience the impact of a variety of contextual factors on their daily quality and safety work



Context can be either inner/internal (e.g., organizational culture and implementation climate) or outer/external (e.g., laws and regulations, external policies, and funding structures) settings of an organization (McDonald 2013).

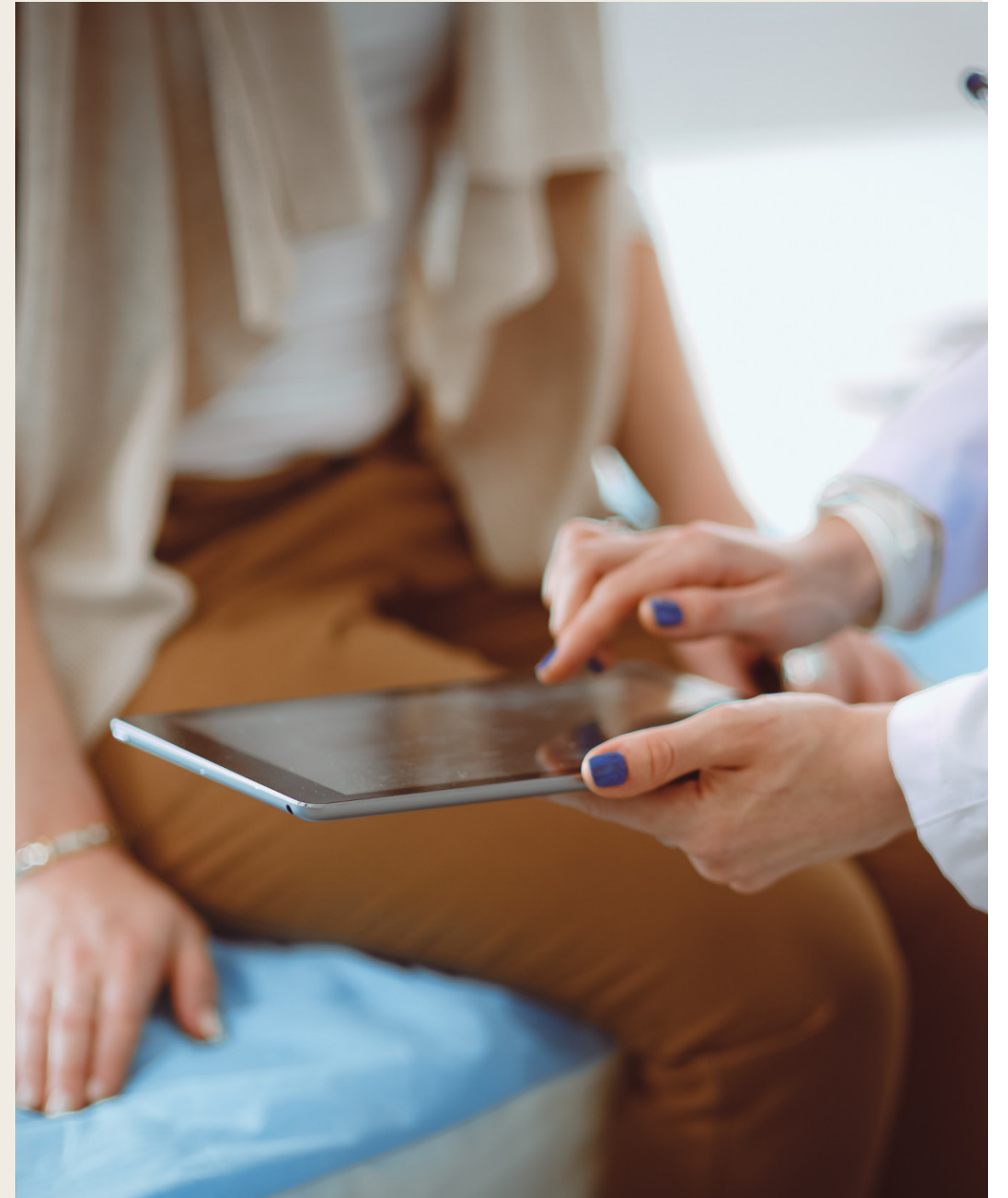
Methods

- Qualitative design
 - Semi-structured interviews
- Sample:
 - Female primary care managers at different levels, working in different units and municipalities varying in size and location
- Analysis:
 - Systematic Text Condensation



Results

- Lack of time and money were significant impediments to quality and safety
 - Resources had to be carefully allocated
 - Negotiations!
- Managers emphasized the importance of networks and competence for their quality and safety work:
 - Within/across municipality
 - Doctors
 - Research
 - Development centers



Results

- Delegation of responsibility to employees:
 - Helped create engagement
 - Improved competence
 - Ensured that new knowledge reached all employees
- External guidelines and demands:
 - Helped to systematize managers' work
 - Helped explain the necessity of quality and safety work
 - Helpful, if they were compliant with daily clinical practice



Conclusion

- Numerous contextual factors influence the managers by determining the **leeway** that they have in quality and safety work by:
 - Setting the budgetary constraints
 - Defining available competence, networks, and regulation
- At first glance these factors appear fixed:
 - BUT: our findings underscore the importance of managers **acting upon** and **negotiating the environment** in which they conduct their daily quality and safety work



” Thank you!

 **SHARE** Center for
Resilience in Healthcare

University of Stavanger



Group discussion



Group discussion

1. How do quality and safety work differ between primary and specialized healthcare?
2. What do we know about the differences and the role of context in quality and safety in primary care in the Nordic countries?
3. What are the particular challenges facing the research on quality and safety in primary care and how researchers need to address these? Are we facing any particular challenges in the Nordic countries?
4. What are the key topics for the Nordic research agenda on quality and safety and primary care?