# PATIENT SAFETY CARAVAN TOOLKIT





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#### 1. BACKGROUND

Patient engagement in health care has been considered a "blockbuster drug of the century" with the potential to achieve the "triple aim" of improved health outcomes, better patient care, and lower costs. Global Patient Safety Action Plan 2021-2030 framework includes seven strategic objectives and 35 strategies. Engaging patients and families as partners in safe care are considered one of the most crucial strategies to improve the safety of care for all; partners can also accelerate progress to achieve their own respective goals. 1

The Saudi Patient Safety Center WHO Collaborating Center on Patient Safety Policies and Strategies works to support WHO programs that aim at promoting patient empowerment & community engagement for ensuring safer care, through the collection of lessons learned from patient safety initiatives. Patients Safety Caravan is considered an empowerment tool that was piloted/implemented in 2019 in the Kingdom of Saudi Arabia in the first place, which proved its impact in promoting patient empowerment and community engagement and starting from the year 2020, was piloted/implemented in Pakistan.

#### 2. PATIENT SAFETY CARAVAN AT THE KINGDOM OF SAUDI ARABIA

# 2.1. Introduction

Through Patient Safety Caravan, the Saudi Patient Safety Center (SPSC) is trying to reach as many patients and families as possible through active members in the community to provide practical information and tools to empower them to improve the safety of their healthcare encounters. It was used as an empowerment tool during the hospitalization journey. Communication was made with Six facilities and Healthcare primary centers based in different regions around the kingdom providing healthcare services.

A patient Safety Caravan is a hypothetical caravan that consists of a group of people (volunteers or healthcare workers). They visit patients and their families in hospital departments (wards, outpatient clinics, emergency departments, waiting areas, or others) to raise awareness about patient safety by empowering, educating, and supporting them.

Most of the healthcare facilities selected for the Patient Safety Caravan were accredited by (The Saudi Central Board for Accreditation of Healthcare Institutions (CBAHI). It is the official agency authorized to grant accreditation certificates to all governmental and private healthcare facilities operating today in Saudi Arabia. This accreditation requires the engagement of patients and families in a different process that supports patient safety implementation. Additional to that, the establishment of New Patient Experience departments in the Kingdom of Saudi Arabia was a great opportunity for the Saudi Patient Safety Center to advocate for patient empowerment through collaboration with them, as they were co-leading patient' engagement strategies with quality and patient safety departments.

Patient Safety Caravan was initiated in March 2019 through training conducted by the Saudi Patient Safety Center team. Saudi Patient Safety Center team started to raise awareness among healthcare providers and medical students (volunteering team) on the patient safety caravan. Starting (from April until August), the hospital's team successfully implemented a patient safety caravan to empower patient & their relatives about their active role in care. A team of volunteers comprised of physicians, medical students, nurses, paramedics, and support staff was constituted.





# 2.2. Methodology

The E-mail communication was started with all Leaders in targeted regions to get their buy-in after explaining the Patient Safety Caravan's aim and objectives.

244 volunteers/staff members were trained to execute Patient Safety Caravan at Out-Door Department (OPD), In-patients department, and ER. Awareness materials in the Arabic language have been provided by SPSC to educate the patients and families about patient safety caravan and empower them during treatment. Teams were assigned to each hospital were assigned to visit the hospitals led by a project team from Saudi Patient Safety Center.

Teams assigned were trained through 6 (Online sessions) ahead of each visit and additional role play onsite to reassure the understanding of the concept. The team was guided to use the online patient safety caravan toolkit as a reference.

A summary of the steps is listed below:

- Entering the Department, asking for permission patient's availability in the room and acceptance to be visited.
- Entering to the patient's room.
- The visit will be in a friendly style by asking about the name of the patient his/her diagnosis, using the Brochure questions according to each area.
- Introducing him/herself, Caravan Concept, the goal of Patient Safety Caravan.
- Asking the patient about his information and his knowledge about his/her diagnosis and what the doctor's role and responsibility for his condition, and the details of his health condition (To start with assessing the patient's engagement level)
- Then start the dialogue with the patient according to the guestions asked in each section.
- The tour concludes at the end of the day by submitting the pictures and verbal feedback to those responsible for the caravan and representatives in the facility.
- Documenting the patient safety caravan visit through Saudi Patient Safety Center's social media accounts.

At the end of the visit, the consolidated report and appreciation certificates are shared with the hospital's team through email. The total number of targeted patients was 3205 patients.





# 2.3. Results & Discussion

During the implementation of the caravan, we noticed the highly committed leadership engage patients since accepting to host the caravan until leaving the facility with requesting to repeat the visit. The impact of the Patient Safety Caravan is remarkable, which helps hospitals to find it as an interactive tool to engage the patients and their families at the hospital level. This initiative is contributed to spreading the culture of patient safety and spreading awareness in the community of the concept of patient empowerment. It also encourages patients and companions to make their voices heard and empower them to exercise their rights, and how involves patients to have an active role when making health decisions with their treatment team. Patient feedback and complaints were identified during sessions. The hospital teams find the patient safety caravan as a quick tool to capture potential improvements in various hospital processes. Additionally, to that, they find it as a Speak-up channel about patient safety incidents. It also built capacities of healthcare providers to promote patient safety with good catches, hospital-associated infections, surgical site Infections, and patient comforts. Communication skills with patients and families among hospital healthcare providers have been improving, and they are asking for more educational sessions about patient empowerment concepts and strategies.

# 2.4. CONCLUSION

Patient safety Caravan is a successful tool to improve the patient safety culture by empowering patients about their healthcare status and helping to reach safer care for all. Incentives such as appreciation certificates should be given to staff actively participating in the initiative.

The Saudi Patient Safety Center started in 2017 and implemented many programs and initiatives that aim to spread awareness about patient safety and empower patients and their families while receiving health care by visiting the healthcare facilities at different occupations. It was noticed through various meetings with many patients and their families that they did not want to ask questions about everything related to their health while receiving health care or dealing with service providers. This behavior can be changed by changing the culture of health sector providers themselves so that they encourage patients to prepare questions as well as change the culture of the community and change their perception that they are responsible for decision-making regarding their health and their active participation with caregivers.

Patient Safety Caravan changed the way how health empowerment is promoted by delivering materials that help patients to be effective and empowered members of their care.

# 2.5. Pictorial View of patient Safety Caravan











#### **Emergency Room**





In-Patients Departments





Waiting areas





#### **Lessons Learned Approach**

Lessons learned from the Patient Safety Caravan project were compiled from the daily input record for the project throughout the project life cycle. Lessons learned from both realized and unrealized risks were collected in the project risk registry, as well as through interviews with project team members and other stakeholders as necessary.

It is also recommended that lessons learned from this project be used as references for future projects, and they should contain a sufficient level of detail so that other project managers have enough information to help build their project plans.

Lessons learned in this document are categorized by knowledge areas of the project. These knowledge areas include procurement management, risk management, integration management, quality management, time management, cost management, scope management, human resources management, and communication management.

Note: Some knowledge areas may not contain lessons learned if none are documented throughout the project life cycle.



# 2.6. Lessons Learned from implementing patient safety caravan in the Kingdom of Saudi Arabia

The following list includes the lessons learned for the Patient Safety Caravan. These lessons are categorized by project knowledge area. Descriptions, impacts, and recommendations are provided for consideration on similar future new construction projects. It is important to note that not only failures or shortcomings are included but also successes.

# Patient Safety Caravan lessons learned in Kingdom of Saudi Arabia

Item Name	Problem/Success	Impact	Recommendation
PS caravan printed educational	Challenges: The Project Manager (PM) (who will implement the Patient Safety Caravan) was not fully engaged in the caravan educational materials printing process.	We had a shortage of printed materials, which affected the time frame of the project.	PM must be fully engaged in all printing contract processes and plan the printing schedule accordingly.
materials			Digitalizing all the educational materials can be a mitigation plan.
The process taken to build the Educational Materials	Success: we had a successful process for building acceptable patient empowerment educational materials, which was built based on best practices reliable resources and then customized to fit our culture then shared and reviewed with patients and their families done by SPSC team.	Minor, or no, modification was needed on the content.	Always plan quality standards into the project plan. This helps avoid delays and cost overruns.
The educational materials content (volume and language)	Challenges: it was raised by some patients and/or public that the content of the materials was too long and difficult. They suggest shortening it, add more graphics and simplify the languages of the contents.	We had to rewrite the content and redesign it, by formulating a Focus Group from both healthcare providers and patients who participated actively in adding valuable comments, which affected the time frame of the project.	We advise using a Co-design, Co-Produce, Co-Assess, and Co-deliver as an approach to the project plan.
Digitalize the patient empowerment educational materials	Success: some patients, their families and/or healthcare providers suggested to digitalize the educational materials. Therefore, we digitalized the educational materials into both forms (PDF flyers, and LCD TV screen posters).	It helped to expand SPSC outreach to many healthcare institutions by displaying the digital posters on their LCD TV screens.	We advise to use different channels to deliver the messages to the patients and their families by:  Utilizing volunteers to speak to the patients and empower them.



Item Name	Problem/Success	Impact	Recommendation
			Sharing a barcode that contains all the educational materials electronically.
			Sharing the digital educational materials with the healthcare institution to display them regularly on their LCD TV screens.
Caravan volunteers' communication skills	Challenges: caravan volunteers faced a problem when delivering the message about PE to the patients and their families, because they lacked communication skills and public speaking.	This affected the delivery of the message by having miscommunication and misunderstanding of the main goal of PS caravan.	<ul> <li>Always Co-design, Co-Produce, Co-Assess, and Co-deliver with Project Stakeholders (for example: volunteers).</li> <li>Recruit some volunteers to deliver the message to the patients from the same hospital, as they get used to communicate with patients and this is already considered part of their daily tasks.</li> </ul>
Diversity of accents and/or languages between the speaker and the patient.	Challenges: the PM and some volunteered Medical Students faced difficulties in communicating with some patients and/or their families who had different accents or languages.	That issue interrupted the delivery of the message of empowering patients and their families.  This allowed the project Manager to setup Volunteers Selection Criteria.	Setup Volunteers Selection Criteria and take into consideration the accent and/or languages of the speaker and the patient.
Reward Plan	Success: There was an award plan for:  Healthcare institutions for hosting and supporting the PS caravan, by providing Certificates and social media recognition.  Healthcare providers / Volunteers for their contribution to deliver the message, by providing Certificates.	Toward the end of the project, morale was high among the project team. There was increased demand, and more hospitals were asking to conduct the PS caravan.	The PM should communicate and plan the incentives/recognition program for every PS caravan.
Volunteer's No- Show	Challenges: There was a recruitment plan for volunteers which include (individuals and Groups). Volunteer's No-Show was noticed by the project manager frequently only with individuals.	During some visits some volunteers apologized or did not show up, which caused canceling the visit.	Setup Volunteers Selection Criteria which include:  Recruiting volunteers from Identified and well- established Volunteers Groups.  Recruiting volunteers from healthcare providers within the same healthcare facility.



Item Name	Problem/Success	Impact	Recommendation
Return on Investment (ROI)	Success: utilizing volunteers was a source of Return on Investment (ROI) by achieving shared Goals between SPSC and Hospitals who are willing to implement the PS caravan, but they have shortage in staff. Medical Students are also required by their universities to submit volunteer hours.	Toward the end of the project, the calculation of Return on Investment (ROI)as the following: 5000 Volunteer hours 250,000 Saudi Riyal ROI	The PM should think of saving money and utilize the available resources using win-win situation.

Patient safety Caravan = PS caravan Project Manager = PM Saudi Patient Safety Center = SPSC Patient Empowerment = PE

# 3. PATIENT SAFETY CARAVAN IN PAKISTAN

#### 3.1. Introduction

The Manawan Hospital (TMH) is a secondary health facility based in Lahore in Punjab province, Pakistan. It is 100 bedded hospital providing state-of-the-art healthcare service delivery in the field of Internal Medicine, General Surgery, Obstetrics & Gynecology, Pediatrics, Neonatology, Orthopedics and Family Medicine.

TMH is one of the healthcare facilities selected for Patient Safety Friendly Hospital Framework (PSFHF) by Health Department, Government of Punjab, and World Health Organization (WHO), successfully implemented critical, core and developmental criteria. (Plan for inter & external assessment in the 1st Quarter of 2022)

Patient Safety Caravan was initiated in the month of June - July 2021, through training conducted by WHO Saudi Collaborating Center on Patient Safety Policies and Strategies. TMH patient safety team started to raise awareness among healthcare workers on the patient safety caravan as it was a new baby for TMH team. On December 01, 2021, TMH team successfully implemented patient safety caravan to empower patient & their relatives about their diseases. Team of volunteers was comprised of physicians, medical officers, nurses, paramedics and support staff was constituted.

# 3.2. Methodology

20 staff members were trained to execute Patient Safety Caravan at Out-Door Department (OPD), In-patients department, and ER. Awareness materials in the Urdu language have been provided by whom to educate the patients and families about patient safety caravan and make them empowered during the course of treatment. 10 teams, each of which comprised two members, were assigned the task in patient care areas. 4 teams carried out sessions at Operation Theater on daily basis and attended 25-30 patients per day, and 2700 sessions were the target to be done in a month. In-patient, OPD, ER, and waiting areas were visited by each team on daily basis. A detailed schedule with tasks was shared with all team members. Counseling rooms have been established to make the process patient friendly and ensure the confidentiality of medical records.

At the end of the visit, a consolidated report is shared with the Head of Campus of TMH and the PSFHF team through email. The total number of targeted patients was 800 patients.





# 3.3. Results & Discussion

The impact of the Patient Safety Caravan is significant, which involves the patients and their families in the process of treatment at the hospital level. This initiative is envisaged to develop patient safety culture at the hospital. Patient feedback and complaints were identified during sessions. It leads towards improvement in various processes at hospitals, specifically patient care and provides us the directions to be more patient friendly. It is further supportive in providing a safe environment for the patients and staff. Patient safety Caravan has improved incident reporting at the hospital level and made patient and their attendants more confident to share their thoughts about diseases. It also built capacities of healthcare providers promoting patient safety with good catches, Hospital associated infections, Surgical site Infections and patient comforts. Communication skills with patients and families among hospital healthcare providers have been improved.

# 3.4. CONCLUSION

Patient safety Caravan is a successful tool to enhance the patient safety culture by empowering patient about their diseases and safer care to prevent harm during the process of care. Incentives should be given to staff actively participating in the initiative.

# 3.5. Pictorial View of patient Safety Caravan

**Out-Door Department** 



In-Patient





#### **Operation Theater**





# 3.6. Lessons Learned from implementing patient safety caravan in Pakistan

The lessons learned from implementing the Patient Safety Caravan in Saudi Arabia was shared with Pakistan hospitals. They all agree that Caravan was a valuable tool in empowering patients and their families. However, Pakistan suggested the following additional recommendations:

Item Name	Problem/Success	Impact	Recommendation
Lack of patient empowerment awareness among (Volunteers /healthcare providers)	Challenges: caravan's volunteers faced a problem while delivering the message about the concept of Patient Empowerment to the patients and their families because they lack the knowledge of how important is to engage patients and their families during their treatment journey. Moreover, empowerment strategies and tools are not familiar to them.	This affected the delivery of the message which might prevent patients and their families from <b>Speaking up</b> and sharing their concerns.	<ul> <li>Conduct workshop sessions about patient engagement / empowerment tools and strategies to all participants (Volunteers /healthcare providers) to help them better activate the caravan.</li> <li>Advocate for patient safety (Advocates/ambassadors) through promoting the patient safety caravan as a patient empowerment tool.</li> </ul>
Implementing PS Caravan during covid-19 pandemic	Challenges: A risk was not registered, which affected the implementation of the PS Caravan, therefore stopped conducting it Onsite due to infection control precautions.	We had to cancel the Onsite visits on the year 2020, therefore delayed of implementing was an issue.	Always consider external impacts on the project cost and schedule. This must be continuous throughout the project lifecycle.

# 4. PATIENT SAFETY CARAVAN TOOLKIT GUIDE

# 4.1. Overview of the patient safety Caravan

It is a patient empowerment tool to reach out to the largest possible number of patients and their families while receiving health care by visiting the healthcare facility, talking to them, conveying the message of patient empowerment, and providing information that helps them to be effective and empowered members in health care through the Patient Safety Caravan. It is a hypothetical Caravan that consists of a group of volunteers and specialists who visit patients and their families in hospital departments (inpatient wards, outpatient clinics, emergency, and others) to raise awareness of patient safety by empowering, educating, and supporting them.



# 4.2. Objectives

- Reaching the largest possible number of patients and their families to empower them to improve their safe care.
- Developing and improving patient safety in hospitals and ensuring that patients and companions share the treatment plan with the medical staff.
- Increase volunteers' awareness to learn about patient safety and share it with patients and their families.
- Partnering with quality & patient safety / patient experience departments within healthcare facilities to activate the concept of patient empowerment within their daily work tasks.

# 4.3. Patient Safety Caravan Outcomes

- Empowering patients by encouraging them to ask questions to healthcare providers within the facility.
- Increasing community awareness of the concept of patient empowerment.

# 4.4. Target group

- The patient (health care recipient) or his companion.
- Volunteers (participants) in carrying out the Caravan.
- Quality & patient safety /patient experience departments as (supporters) for the implementation of the Caravan.

# 4.5. What is the benefit of participating in the Patient Safety Caravan?

- Contribute to spreading the culture of patient safety.
- Spreading awareness in the community of the concept of patient empowerment.
- Encouraging patients and companions to make their voices heard and empowering them to exercise their rights.
- Involving patients to have an active role when making health decisions with their treatment team.
- Raising health practitioners' awareness of the importance of patient empowerment and its impact on reducing the incidence of medical errors.

# 4.6. Content of Patient Safety Caravan Toolkit

The Patient Safety Caravan contains several brochures on various topics:

**Be an empowered patient:** this content empowers patients, in general, to understand their health condition and know their rights in healthcare institutions.

**Be an empowered patient during your hospital stay**: this content empowers patients to properly communicate with their medical team and how to oversee their care during their hospitalization.

**Be an empowered patient in the Emergency Department:** This content empowers patients in the emergency department, explains the importance of effective communication, sharing the correct patient information with the medical team, and educates them on how to prevent getting infected.

**Be an empowered patient during your hospital visit:** this content helps patients prepare before and during their appointments with health practitioners, to make the best decisions about their health and enable them to discuss and know their medications with pharmacists

**Be an empowered patient before and after surgery**: this content empowers patients to ask questions, discuss and make appropriate decisions about their health before and after surgery and after discharge.

**Medication Safety**: This content enables patients to discuss questions related to their medications and activate their role during care transition and polypharmacy.





# **4.7.** Patient Safety Caravan steps:

#### Before the field visit:

- Scheduling the Caravan: determining the date, time, and location (hospital or primary healthcare center).
- Communicating with officials at the facility to obtain approval.
- Requesting local volunteers.
- A remote meeting (online) for the nominated volunteers for a period of one to two hours to explain the Caravan.
- Print the Patient Safety Caravan Toolkit flyers to be distributed to patients or made them available electronically.

# The day of the field visit:

Proceed to the healthcare facility that has been selected to implement the Patient Safety Caravan.

Preparing volunteers and distributing tasks among them.

- Volunteer leader.
- Volunteer photographer after taking the patient's approval.
- Volunteer speakers.

Meeting with the responsible person in the facility (facility manager, patient experience manager, or quality and patient safety).

The start of the tour, where volunteers head with a member of the facility through admission departments, outpatient clinics, emergency departments, and waiting areas.

#### **Distribute brochures to patients:**

"Be an empowered patient" brochure is distributed in all sections during the tour.

"Be an empowered patient during your hospital stay" brochure is distributed in hospital admission wards.

"Be an empowered patient in the Emergency Department" brochure is distributed in the emergency department and waiting areas.

"Be an empowered patient during your hospital visit" brochure is distributed in the outpatient department and waiting areas.

"Be an empowered patient before and after surgery" brochure is distributed in the inpatient surgery wards and outpatient surgery clinics.

**Medication Safety**: the brochure is distributed in the outpatient department and waiting areas

#### Q.R. code of Brochures





#### When entering the patient's room:

- Greeting the patient, then introducing themselves.
- Introducing the Caravan and its aim.
- Asking about the patient's name and his/her condition.
- Asking the patients about the extent of his/her knowledge of the details of their condition and the doctor in charge.
- Then start a dialogue with the patient according to the questions stated in each brochure and distribute them matching the patient's needs.

Share a questionnaire: about the effectiveness of the patient safety caravan by asking the suggested questions below:

# How satisfied are you with the visit of the "Patient Safety Caravan" team?

- Very satisfied
- Satisfied
- Neutral
- Unsatisfied
- Very unsatisfied

#### How satisfied are you with the information or patient empowerment brochure?

- Very satisfied
- Satisfied
- Neutral
- Unsatisfied
- Very unsatisfied

Kindly, provide us with any suggestions or comments for improvement.

The tour is concluded with a meeting with volunteers and officials to give feedback and recommendations proposed by all parties aimed at improving the performance of patient safety caravans as lessons learned.

#### 5. REFERENCES

1. Global Patient Safety Action Plan 2021-2030. Accessed September 1, 2022. <a href="https://www.who.int/teams/integrated-health-services/patient-safety/policy/global-patient-safety-action-plan">https://www.who.int/teams/integrated-health-services/patient-safety/policy/global-patient-safety-action-plan</a>.





