

A5: What is safety-netting? Come and practice safety-netting in real life!



International Forum on
QUALITY & SAFETY
in **HEALTHCARE**
COPENHAGEN



Adapting to a changing world: equity, sustainability
and wellbeing for all



 @QualityForum #Quality2023

 Institute for
Healthcare
Improvement

BMJ



**Karolinska
Institutet**

Safety-netting advice – a way to avoid harm from diagnostic errors

Rita Fernholm, G.P., PhD

Kiku Pukk Härenstam MD, PhD, Associate professor

Helena Conning, Lead Patient



No conflicts of interest



**Karolinska
Institutet**

AT THE CLINIC



15 MIN EARLIER

Discuss with your neighbour:

**HAVE YOU EXPERIENCED VISITS LIKE
THIS ONE?**

The burden of diagnostic error

- Global
 - Singh H et al, The global burden of diagnostic errors in primary care. *BMJ Qual Saf.* 2017
- Sweden
 - Fernholm R et al, Diagnostic errors reported in primary healthcare and emergency departments *European Journal of General Practice.* 2019



44 %





REFLECTIONS FROM A PATIENT'S PERSPECTIVE...

Safety-netting

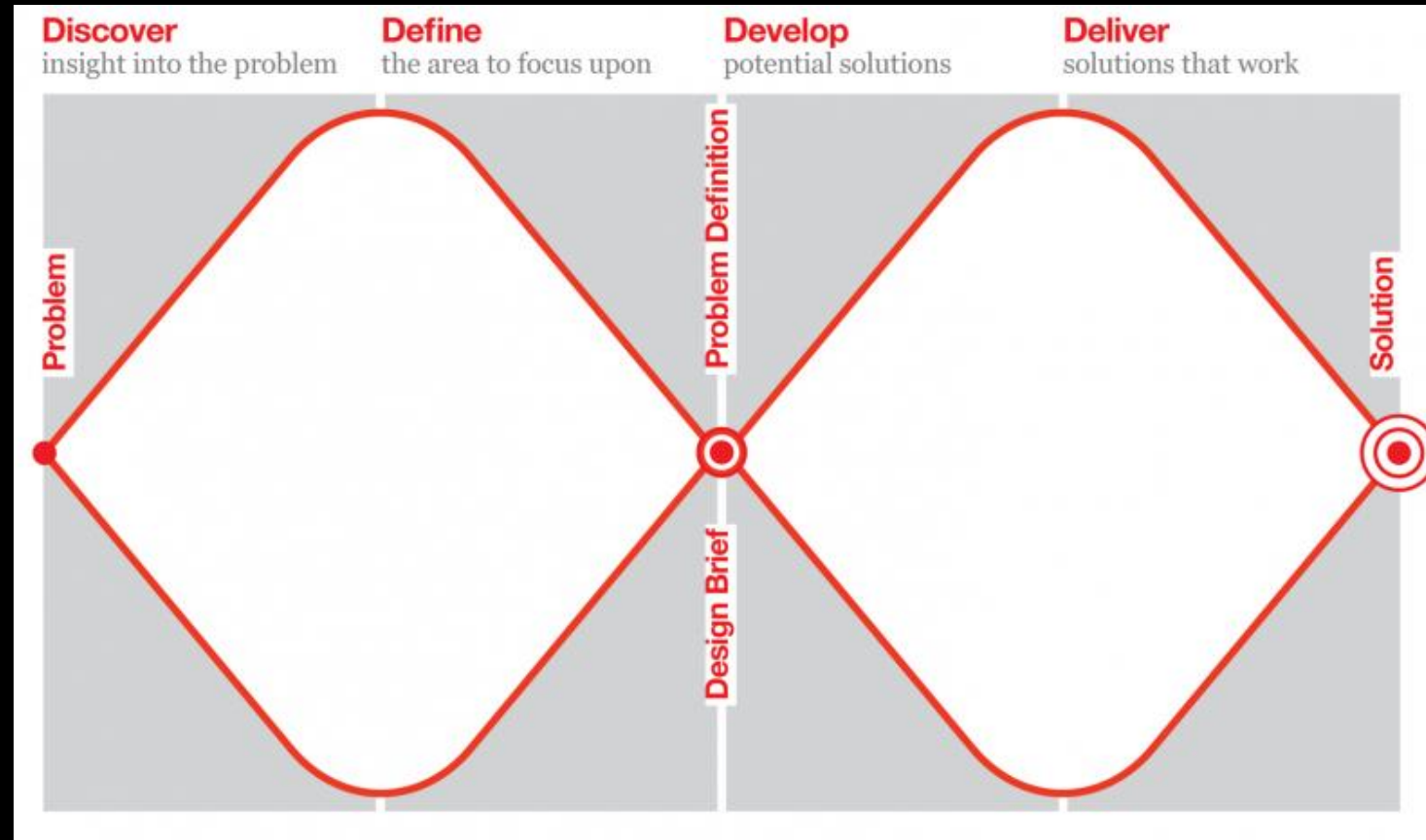
Be open about that the diagnosis is not 100% certain

Tell the patient what to expect if the diagnosis is correct,

what look out for if it is not,

and when and where to seek advice again

Safety netting from a co-design perspective



Co-designing Safety-netting

- Focus groups and interviews with doctors and patients
- Two main themes: Delineating the meaning and purpose of safety netting and sharing strategies for applying safety-netting

Co-design process 2021

Important aspects of safety-netting in the clinic

- To be taken seriously
- Communication and partnership
- Openness about diagnostic uncertainty
- What happens next, what do I look for, where can I seek care?
- Actionable advice
- Intergration in current practices

What does safety netting mean to me?

May
17th

Co-designing a structure for safety-netting advice

May
24th

May
21st

What are important aspects to include in Safety-netting training?

May
27th

Straw model of a course

- Patient agency
- Diagnostic thinking
- Teach-back
- Role playing
- Practical exercises
- Concrete suggestions on how to apply
- Implementations support for the clinical units

Safety-netting training

June
11th

Further development of safety-netting materials and design of web-based education



BACK AT THE CLINIC

Discuss with your neighbour:

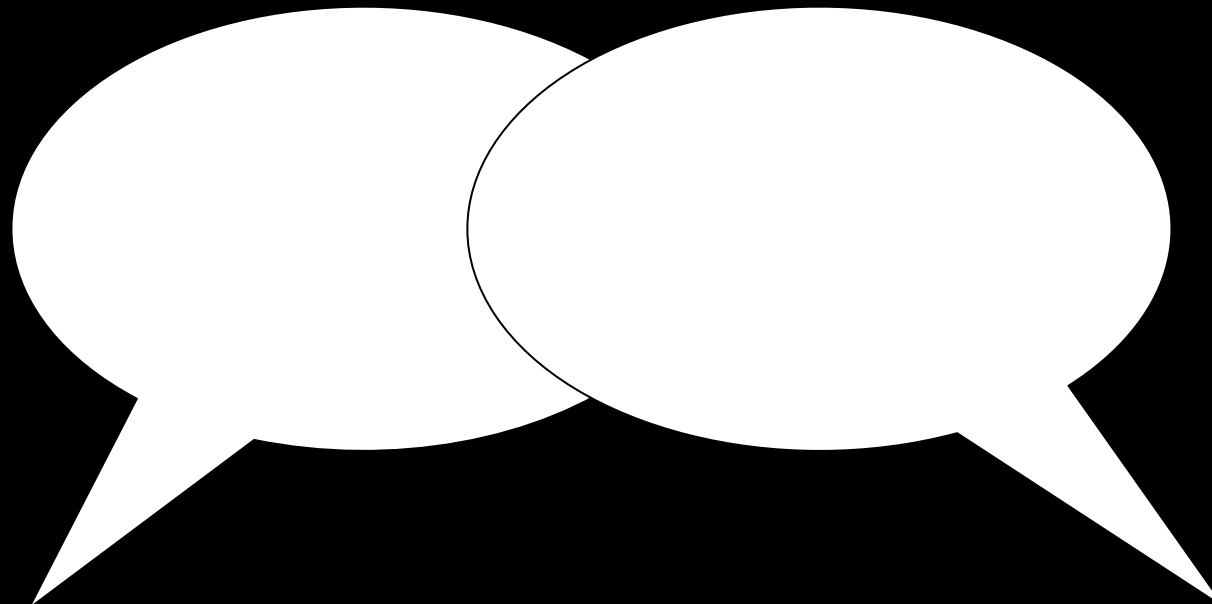
**WHAT DIFFERENCES IN THE
CONVERSATION DID YOU NOTICE?**

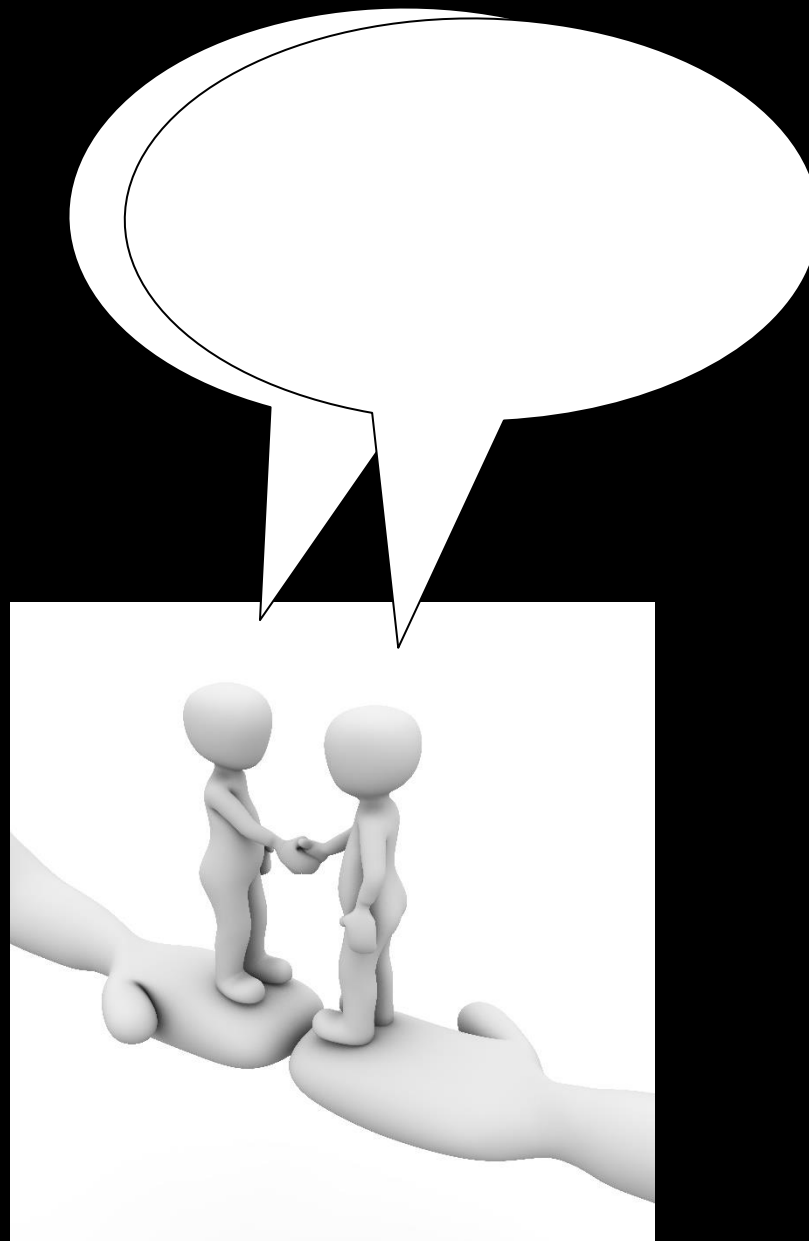


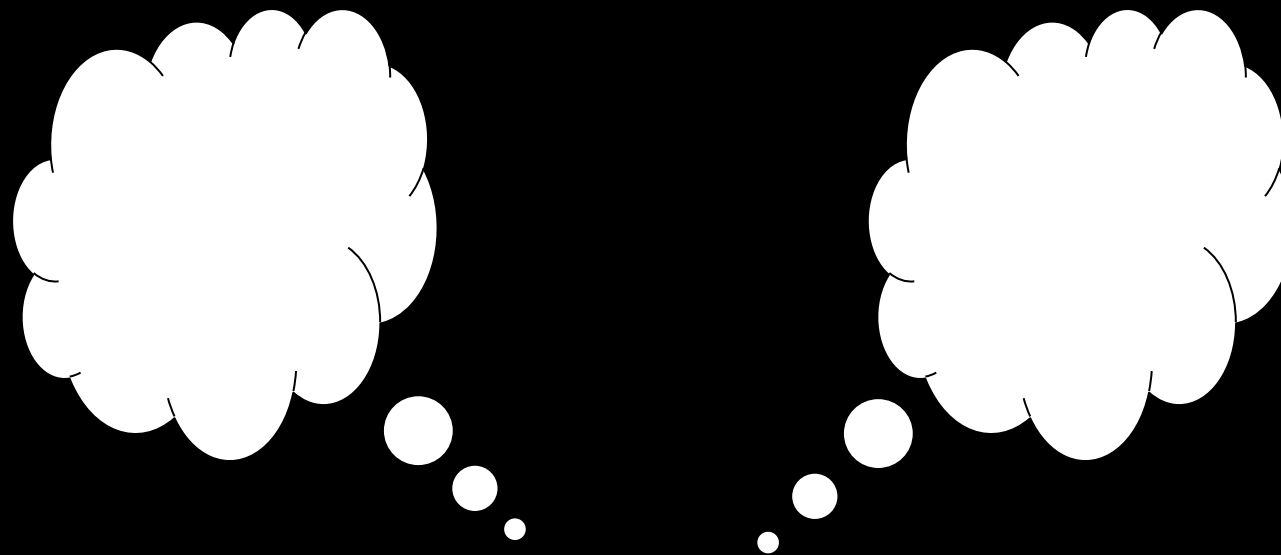
**Karolinska
Institutet**

Do we understand each other?











**Karolinska
Institutet**

Teach-back!



**Karolinska
Institutet**

Safety-netting

BE SAFE, safety-netting:

See the uncertainty – and be open about it

Anticipate course of events – communicate what can be expected (ok to stay at home)

Flags – tell what to look out for (red flags, come back)

Engage – by teach-back, do we have the same understanding of the above?

PRACTICE SAFETY- NETTING

- In groups of three:
 - One plays the part of the patient seeking care for fever since 4 days
 - One plays the role of the clinician
 - One person observes
- The clinical assessment and labs in the situation do not indicate serious illness at this point and the plan is for the patient to go home
- Apply the safety netting algorithm in your conversation
- Take turns if you have the time
- Reflect on the experience together

If you want- take a picture of
this slide

PRACTICE SAFETY-NETTING

- **The patient:**
 - You are X years old and healthy. The last 4 days you have been ill with a fever (38.5 degrees centigrade). You have experienced some nausea and dizziness and today you seek care at an out of hours service.
- **The clinician:**
 - You have taken the history and assessed the patient. Apart from the fever, at this point, there is no sign of a serious infection. You have decided that this is most likely a viral infection and that the patient can go home.

BE SAFE, safety-netting:

See the uncertainty – and be open about it

Anticipate course of events – communicate what can be expected (ok to stay at home)

Flags – tell what to look out for (red flags, come back)

Engage – by teach-back, do we have the same understanding of the above?



**Karolinska
Institutet**

”Medicine is a science of
uncertainty, and an art of
probability”

William Osler

”Doubt is not a pleasant
condition, but certainty is an
absurd one”

Voltaire

A close-up photograph of several hands of different ages and skin tones clasped together in a circle. The hands are resting on a green, grassy surface. The text 'Safety-netting to avoid harm' is overlaid in white, bold, sans-serif font, following the curve of the hands.

Safety-netting to avoid harm