

# Helsinki Declaration 2016: Global Patient Safety

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**The European Society of Anaesthesiology (ESA) and ASA share the same aspirations to provide high-quality and safe anaesthesiology care to our patients.** The two world-leading societies have prepared a memorandum of understanding for closer cooperation. In 2014, ASA President Jane C.K. Fitch, M.D., wrote a letter of support to the European Board of Anaesthesiology (EBA) and ESA presidents: “On behalf of the over 52,000 members of the American Society of Anesthesiologists, I am writing to congratulate the European Board of Anaesthesiology and the European Society of Anaesthesiology on the initiative of the Helsinki Declaration for Patient Safety in Anaesthesiology. Patient Safety is our top priority and the ASA fully supports the Heads of Agreement and shares the ambitions of all organizations worldwide who are working hard to make patient care safer.”



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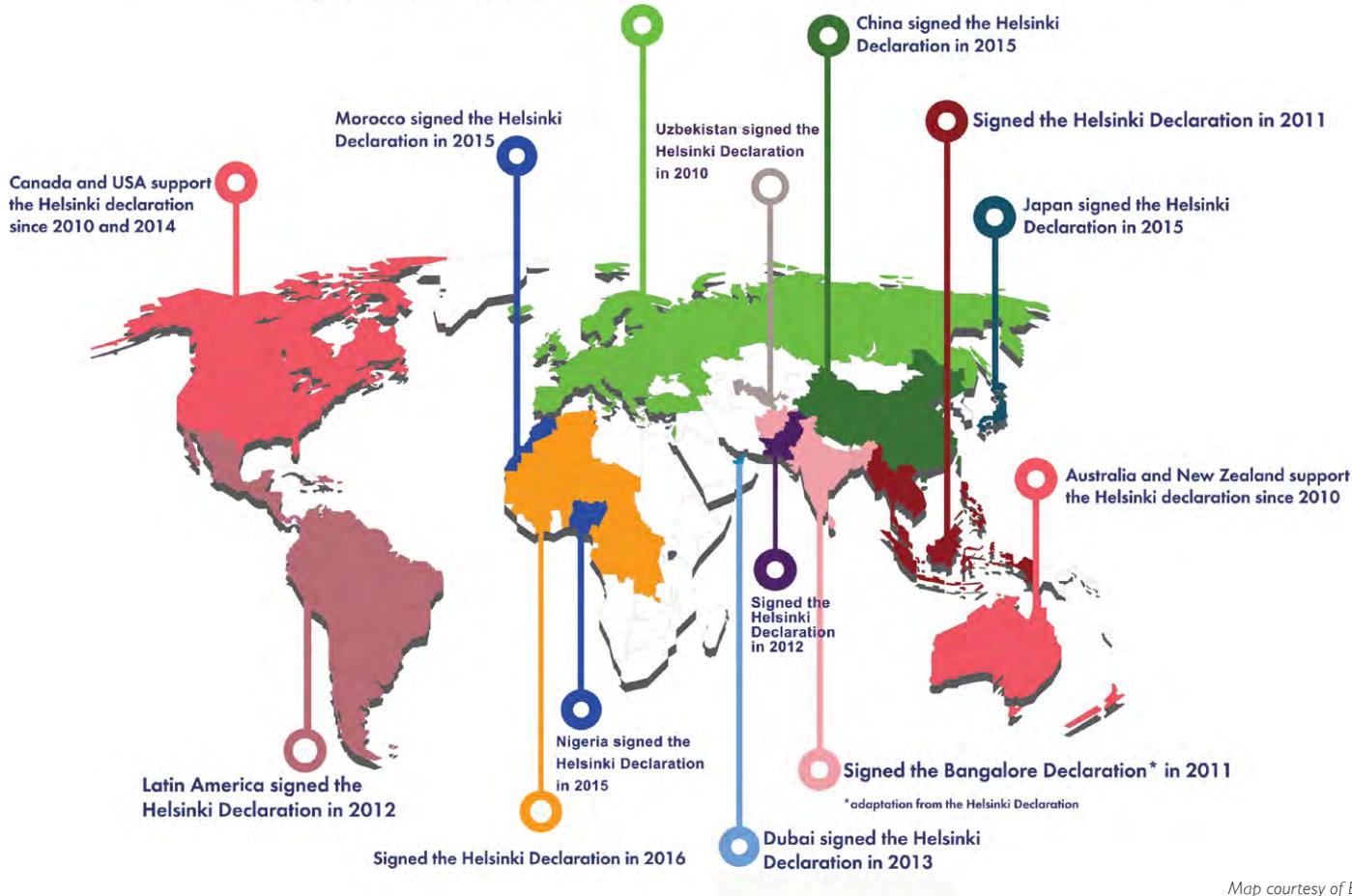
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# Helsinki Declaration on Patient Safety in Anaesthesiology

Signed the Helsinki Declaration in 2010



Map courtesy of ESA.

## Helsinki Declaration: Background

Sadly, today in Europe, some patients are harmed while they should be healed. In 2008, 230 million patients were estimated to undergo major surgery. Of these, 7 million developed severe complications, leading to 1 million dying, corresponding to 200,000 deaths in Europe every year.<sup>1</sup> As late as in 1982, an estimated one out of 10,000 patients died due to anesthesia alone.<sup>2</sup> Anesthesia has become much safer since then. We have introduced new methods and drugs, and better equipment and monitoring. We have improved training as well. Reports from the 1990s and 2000s estimate the anesthesia-related death risk at one in 100,000,<sup>3-5</sup> or even less.<sup>6,7</sup>

Anesthesiologists safeguard the patient's best interest whenever they are at the most vulnerable, be it in anesthesia, intensive care medicine, pain or critical emergency medicine – the pillars of European anaesthesiology. Therefore, who could be more suited to set the standard? Individual European countries have their own training programs and patient safety initiatives; some advanced and well-developed, others barely there.

The EBA is the political arm of European anaesthesiology and a part of the European Union of Medical Specialists (UEMS). The UEMS sets standards for high-quality health care practice and lobbies at the EU and national level. The ESA is the corresponding scientific arm. The EBA worked with ESA to develop the Helsinki Declaration of Patient Safety in Anaesthesiology, launched in 2010.<sup>8</sup> Anyone involved in health care was encouraged to join and sign on to the declaration, which endorses the World Federation of Societies of Anaesthesiologists (WFSA) International Standards for a safe practice of anesthesia.<sup>9</sup> It describes the roles of patients, health care funders, clinical partners (physicians, nurses, etc.) and the industry. It defines principal requirements regarding minimal monitoring standards, protocols, facilities, compliance to safety initiatives and reports. We emphasize the importance of education and training. The World Health Organization, WFSA, UEMS, patient organizations, medical technical industry, and all national societies represented in EBA and ESA were present at the launch seminar.

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The declaration was prepared with Europe in mind, and the European national societies and other stakeholders signed first. We did not expect it to “go global.” But soon it became obvious that the anesthesiology world was ready to work on this together. Brazil signed at the launch. In 2011, the 10 countries in the Confederation of the ASEAN Societies of Anaesthesiologists signed, and the South Asian countries signed the Bangalore Declaration, which is more or less the same declaration with another name. All remaining CLASA (Latin American) societies signed in 2012, and Dubai in 2013 (as the first Arab country). The national societies of Canada, Australia and New Zealand supported the declaration in 2010. ASA support is a source of inspiration for all countries and stakeholders that have signed.



### 2016 Update

The five years' celebration of the declaration took place at the Euroanaesthesia conference in 2015. Both China and Japan signed at that event. Until 2015, Africa had been a blank spot on the signature map. Recently, the two first African countries, Morocco and Nigeria, have signed. Morocco has taken a great regional leadership, so that in January 2016, nine additional French-speaking African countries signed the declaration.

All of these signatures could easily have become a signing gesture only and soon forgotten. An implementation strategy and some tools were crucial to keep that from happening. The ESA has provided a patient safety course and a book on patient safety, which is available from the downloadable starter kit,<sup>10</sup> which also contains templates of a department safety report, hazard warnings, videos of relevant lectures and more.

### Future Goals

The declaration was met with an enthusiasm that indicates there was a clear need for an international patient safety initiative and network. Using the implementation of the Helsinki Declaration, we aspire to see overall awareness and safety culture improving, beginning at the grassroots level in every anesthetic department in Europe and beyond. In Europe, we are developing new programs. The Patient Safety and Quality Committee has been upgraded in the organization. Current activities will continue with the basic courses. Patient safety masterclasses will be consolidated and an educators training course developed. We plan to implement a common European “near miss”

platform. The experienced and successful societies should inspire and support those that are still struggling by mentoring and providing tools. Research and international collaboration are integral parts of the strategy. We must develop a safe and open culture and demonstrate to our leaders and funders that they need to invest in proven programs to improve patient safety. Europe can also learn from other countries. To date, Brazil<sup>11</sup> and

Morocco have made very detailed benchmarking and plans to improve, point by point, on the declaration text. Australia and New Zealand are sharing their expertise. The ESA and ASA patient safety champions plan to strengthen our link with future research and educational collaboration. The global spread of the Helsinki Declaration is the process, not the goal. If all patient safety and quality visionaries can inspire colleagues around the globe to join together, there is hope that we can see a day when the term “harmed patient” is a rarity.

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