ISCOME
International Society for
Communication Science and Medicine

Monday, 15 June 2015

9:00 Opening Address, Annegret F. Hannawa, Ph.D. (ISCOME President) and
Tommaso Bellandi (Centre for Patient Safety, Tuscany/Italy)

9:30 Plenary "The Error(s) of our Ways: Communicating Competently for Health and Safety"
Brian Spitzberg, Ph.D. (San Diego State University, California, USA)

10:30 Coffee Break

11:00 Parallel Sessions (peer-reviewed submissions)

Workshops 1: "Supporting the Second Victims of Adverse Events" (Albert Wu, M.D. The Johns Hopkins Bloomberg School of Public Health, USA)

Description: Adverse events are inevitable in healthcare. Growing attention is being paid to improving systems to make health care safer and to being open with patients harmed during the provision of medical care. In contrast, there has been little attention to helping health care workers cope with adverse events. 'Second victims' are providers who, in addition to patients and families, are also traumatized by adverse events. Many second victims experience grief, fear, intrusive thoughts, somatic symptoms and self-doubt. In the short term, some have difficulty coping and their performance may be impaired. A few go on to longer term problems similar to post traumatic stress disorder. In recent years, a few programs have been developed to help care for caregivers who are traumatized by adverse patient events. This session will describe the problem of second victims in health care, its importance for individual clinicians and its importance to patient safety. Session participants will share experiences to increase their awareness of the issue and of how peer responses can affect second victims. The session will describe a novel second victim peer support program based on the concept of psychological first aid. Participants will conduct exercises to demonstrate elements of psychological first aid and support.

The session will close with discussion about the development and evaluation of peer support programs in development and evaluation of peer support programs in participants' own institutions.

Session Learning Objectives

Define 'second victim' and list associated signs and symptoms

Explain the significance of the second victim phenomenon and its impact on students, trainees, physicians, health care organizations and patient safety

Identify helpful and hurtful things that physicians can say to second victims

Describe useful elements of a peer support program for physicians and other health care workers

13:00 Lunch

14:00 Roundtable Discussion "The Golden Bridge: Communication and Patient Safety"
Chairs: Annegret Hannawa and Julius Pham

Panelists:
Albert Wu, M.D. (The Johns Hopkins University Medical School, USA), Walid Afifi, Ph.D. (University of Iowa, USA); Brian Spitzberg, Ph.D. (San Diego State University, USA); Sandra Petronio, Ph.D. (IUPUI, USA); Antonio Rizzo (University of Siena)

15:30. Coffee Break

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16:00 Plenary "The Human Factors in Patient Safety,"
Sebastiano Bagnara, Ph.D. (National Research Council, Rome, Italy)
Chairs: John Øvretveit and Elena Vegni

17:00 Parallel Speedy Presentations (peer-reviewed submissions)

Workshop 2: "Using evidence and research to assess and improve patient and provider communications"
(John Øvretveit, Ph.D., Karolinska University, Sweden)
Description: The purpose of this workshop is to understand and apply the evidence relating to patient-provider and provider-provider communication. It presents evidence about problems and interventions to resolve problems in communication with patients and between providers. We learn simple methods for assessing the economic return on investing in interventions to make improvements and about effective implementation strategies for improvement. The workshop draws on the author's recent review of the evidence and research and experience since 1985 on quality and safety improvement.

Workshop 3: "Tacit Knowledge Sharing as a Contributor to Highly Reliable, Safe Patient Care"
(Lorri Zipperer, M.A., Zipperer Project Management, USA)
Description: The sharing of what is known impacts the quality and safety of care, yet it has not been robustly explored as a factor in creating a highly reliable, learning health system. This session will introduce tacit knowledge transfer as an element of care that deserves attention distinct from data and information sharing via healthcare technology. It will highlight results of a qualitative exploration on the value of tacit knowledge sharing from both blunt- and sharp-end perspectives. Barriers impacting the reliable access and management of tacit knowledge will be discussed. Considerations for implementing knowledge sharing initiatives in the acute care environment will be introduced. Research and multidisciplinary partnership opportunities to understand the intersection of patient safety and knowledge sharing and the potential for system failure will also be explored.

19:30 Work conclusion

TUESDAY 16 JUNE 2015

8:30 Poster Session (peer-reviewed subsmissions)

9:30 Plenary "Clinician-Patient Communication and Health Outcomes," Richard Street Jr., Ph.D. (Texas A&M University, USA)
Chairs: Laura Rasero and Brian Spitzberg

10:30 Coffee Break

11:00 Parallel Sessions (peer-reviewed submissions)

Workshop 4: "Handover skills" (Giulio Toccafondi, Sara Albolino, and
Tommaso Bellandi; Patient Safety Center of Tuscany, Italy)
Description: Patients' handover is critical in complex health care. The lack of effective communication is one of the main contributory factors for the majority of sentinel events in the US and in Europe. The handovers of medical information is a communication activity, and it is enabled by a set of competencies and contextual conditions. Which are the criteria to proactively evaluate the risk levels of handovers in health care units, and what are the actions for identifying and anticipating such risk levels? The participants will take part in practical activities and in group sessions to explore operative contexts and identify the conditions that may facilitate or hinder safe handovers

13:00 Light Lunch

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14:00 Roundtable discussion "Case Studies: Communication and Patient Safety"
Chairs: Albert Wu and Sandra Petronio

Panelists:
Julius Pham, M.D., Ph.D. (The Johns Hopkins University Medical School, USA);
Debra Roter (The Johns Hopkins University Bloomberg School of Public Health, USA);
Wayne Beach, Ph.D. (San Diego State University, USA); Richard Street Jr., Ph.D. (Texas A&M, USA);
Ed Kelley (WHO), John Øvretveit (Karolinska University, Sweden), Elena Vegni, (University of Milan, Italy),
Robert S. Juhasz, D.O. (The Cleveland Clinic, USA)

15:30 Coffee Break

16:00 Plenary "Horizons for Patient Safety," Sir Liam Donaldson (Imperial College, UK)

17:00 Reflections on the Past, Present and Future of Patient Safety
Chairs: Brian Stafford and Roberto Satolli

Panelists:
Italian Minister of Health, Regional Chancellor for Health of the Tuscany Region,
Jean Bacou (Haute Autoritè de Santè, France – PASQ EU project coordinator),
Basia Kutriba (National Center for Quality Assessment in Health Care, Krakow, Poland),
Riccardo Tartaglia (Italian Network for patient safety), Gianfranco Gensini (University of Florence, Italy);
Ed Kelley (WHO)

18:00 Closing remarks, Annegret Hannawa Ph.D. (ISCOME President)
End of the Conference

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SCIENTIFIC RATIONALE

Medical errors are one of the leading medical causes of disability in the world. Institutional efforts to prevent such undesirable incidents are prevalent, but have not reduced them to satisfactory rates. One of the emerging themes is that the medical field cannot seem to resolve this problem on its own. Instead, interdisciplinary collaborations are needed to advance effective, evidence-based interventions that will eventually result in measurable improvements. Building a "golden bridge" to develop strategic interdisciplinary research collaborations that pursue these concrete challenges is the core purpose and goal of the ISCOME 2015 conference.

The ISCOME 2015 conference aims to accomplish two main objectives:

(1) Knowledge integration and (2) knowledge generation.

On the first track, the invited scholars will calibrate their interdisciplinary perspectives on medical error, and generate first draft outlines of joint publications on the intersections between their disciplines. Numerous collaborative papers will be initiated on this track, identifying how the disciplines can together inform areas of medical practice in which human error is common, particularly diagnosis, team conflict interactions, and handoffs. The second track of the meeting will entail the generation of new knowledge and empirical evidence to the field and put the interdisciplinary aspects into action. Participants will work together to shed a new interdisciplinary perspective on their existing data, and generate grant proposals that contribute new evidence to the field.