# Shifting from Blame-&-Shame to a Just-and-Safe Culture

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## Conflict of Interest

- I have no conflicts to disclose.

## Objectives:

- Identify characteristics that differentiate a Blame & Shame Culture from a Just & Safe Culture.

- Identify some tips to improve the safety culture of your organization or team.

## The Blame & Shame Punitive Culture

- Individual workers held fully accountable for patients outcomes.
- Perfect performance is achievable through education, professionalism, vigilance and care.
- Threat of disciplinary action for errors thought necessary to maintain proper safety vigilance.
- Error follow-up focused on individual weaknesses.
- Focused on weeding out of "bad apples"!

## Impact of Punitive Culture

- Decreased incident reporting re: self and colleagues.
- Decreased reporting of near-misses and hazards.
- Creation of work-arounds…introduces new risks.
- False sense of security.
- Missed opportunities to learn about risks and implement changes.

## Blame-Free Culture

Institute of Medicine's "TO ERR IS HUMAN: BUILDING A SAFER HEALTH SYSTEM" first identified the failure of the Punitive Culture:

"*One of the report's main conclusions is that the majority of medical errors do not result from individual recklessness or the actions of a particular group--this is not a "bad apple" problem. More commonly, errors are caused by faulty systems, processes, and conditions that lead people to make mistakes or fail to prevent them. For example, stocking patient-care units in hospitals with certain full-strength drugs, even though they are toxic unless diluted, has resulted in deadly mistakes.*"

## Blame-Free Culture

- Acknowledges human fallibility.

- Recognizes systems issues that may contribute to error.

- Understands there is little benefit to punishing workers for unintentional acts.

## Down Side of a Blame Free Culture

- But fails to confront individuals who:
  - willfully make unsafe behavioral choices.
  - knowingly disregard risk.

## How does a Just & Safe Culture act?

What is this CULTURE thing???

- A pattern of basic attitudes shared by a team/organization:
  - Value - What is important to us in our work day?
  - Beliefs - What do we believe about the work we do?
  - Behaviors - How do we go about our work?

These are 'taught' to staff in both explicit and implicit ways.

## How does a Just & Safe Culture act?

- The belief and the practice of placing patient safety at the centre of everything we do in healthcare.
- An exact definition of a culture of safety is still emerging in healthcare…
- Using themes from high-reliability organizations (HROs) like aviation, nuclear power production, etc. can get us there.

## How does a Just & Safe Culture act?

- Strategic emphasis on safety
  - A palpable passion for safety, grounded in a healthy acknowledgment of the high-risk nature of healthcare.
  - Preoccupation with failure/safety.
- Just culture
  - Supports reporting and investigation of hazards and errors.
  - Staff trust each other and their leaders and report hazards and errors without fear of retribution or embarrassment.

## How does a Just & Safe Culture act?

- Feedback loops
  - Have established, meaningful, feedback systems that keep staff informed about safety, errors and causal trends.
  - Leaders hold discussions with staff to learn about barriers to safe work, to build trust and to demonstrate that safety is a priority.

## How does a Just & Safe Culture act?

- Learning organizations
  - Enhance capacity through real-life experiences gained over time.
  - Staff see learning as inseparable from everyday work and a necessary precursor to change.

## How does a Just & Safe Culture act?

- Desire to change
  - Profound change comes from commitment, not management-driven compliance that directs to staff to 'just do it'.
  - Staff carry a great deal of power when it comes to either maintaining the status quo or changing.

## Approach to Safe Culture Improvement

- 2 fundamental assumptions underlying much of the safety culture research
  - A positive safety culture is associated with improved safety performance.
  - It is possible to improve the culture of a team/organization.

## Approach to Safe Culture Improvement

| Maturity Level | Approach to Improving Safety Culture |
|---|---|
| Pathological | Why do we need to waste our time on safety? |
| Reactive | We take patient safety seriously and do something WHEN we have an incident. |
| Calculative | We have rules, policies and procedures in place to manage patient safety. |
| Proactive | We are always on the alert/thinking about safety issues that might emerge. |
| Generative | Managing safety is an integral part of everything we do. |

## Approach to Safe Culture Improvement

- Avoid organizational arrogance.
- Actively pursue what is unknown.
- Make information & data available.
  - Use available technology.
- Empower staff to recognize and respond to system abnormalities.
- Design redundancy – make it easy to do the right thing.

## Approach to Safe Culture Improvement

- Set an environment that supports teamwork and communication.

- Use of Structured Communication Techniques:
  - Briefings/ Time-outs/Huddles
  - SBAR/ DARP
  - Common Language
  - Debriefings

## Approach to Safe Culture Improvement

- Set the tone for teamwork & situational awareness.

- Shared understanding of:
  - What's going on?
  - What's likely to happen next?
  - What to do if what is supposed to happen doesn't?

## Approach to Safe Culture Improvement

Situational Awareness Strategies
- Use concise, specific and timely communication.
- Ensure every team member knows the game plan.
- Acknowledge and demonstrate common understanding (e.g. repeat-back).
- Talk to one another as events unfold so the team can monitor and verify perspectives.
- Anticipate the next steps and discuss contingencies.
- Constructively assert opinions and perspectives.
- Verbalize any red flags.

## Approach to Safe Culture Improvement

Bottom Line:

- Good communication... talk to each other & your patients...

- Talk about safety issues and learn from the experiences of others (good and bad).

## Approach to Safe Culture Improvement

- In the hospital setting we've had good success with the use of safety huddles.
  - Teams, patient care areas, etc. start their day with a 10-minute huddle and discuss the day ahead; error prone situations, anticipated stressors, etc.
  - Time is always on short supply... huddles are manageable chunks of time!

## Approach to Safe Culture Improvement

- Trust & Support...
  - Staff are empowered and freely participate in all safety discussions without judgement.
  - Support and follow-up after an incident has occurred.
- Our regional safety committee is at a point where sharing of vulnerabilities is a teaching moment for all... solutions are found together!
  - Does not happen immediately! Trust has to be earned.

## References

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