

# Patient Safety in Digital Healthcare: Ensuring the intangible



Ciarán McInerney, PhD.



**NIHR**

Yorkshire and Humber  
Patient Safety Translational  
Research Centre

**Digitise, connect, transform**

Guidelines for digitised healthcare

*“to digitise the entire NHS by 2024”*

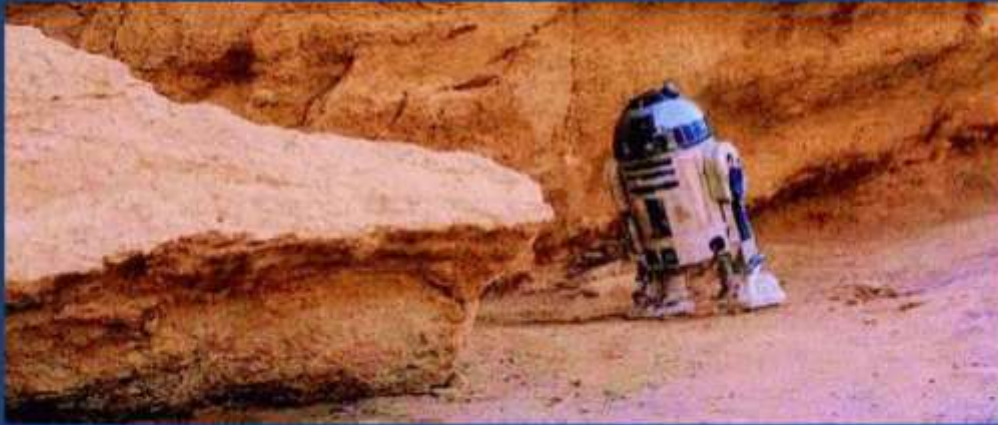
*“ensuring that digital systems are designed  
to meet the needs of their users”*

**NIHR**

Yorkshire and Humber  
Patient Safety Translational  
Research Centre

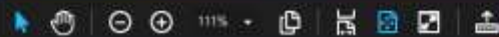
# Use digital; don't live digitally

## Power cut?



NIHR

Yorkshire and Humber  
Patient Safety Translational  
Research Centre



# Patient Safety in Digital Healthcare: Ensuring the intangible

Headingly Café Scientifique - 13<sup>th</sup> Sept 2021



**NIHR** | Yorkshire and Humber  
Patient Safety Translational  
Research Centre

## What is safety?

**NIHR** | Yorkshire and Humber  
Patient Safety Translational  
Research Centre



£100,000,000



Safety 1

Safety 2

Discourage Bad

?

Encourage Good

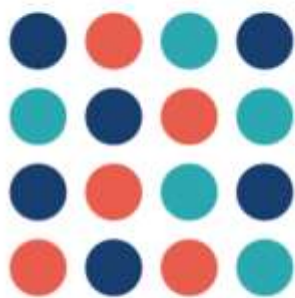


- a. More to discourage
- b. More to encourage
- c. Same to both



NIHR

Yorkshire and Humber  
Patient Safety Translational  
Research Centre



# Safety in Numbers

<https://safety-in-numbers.co.uk/>



# Case studies

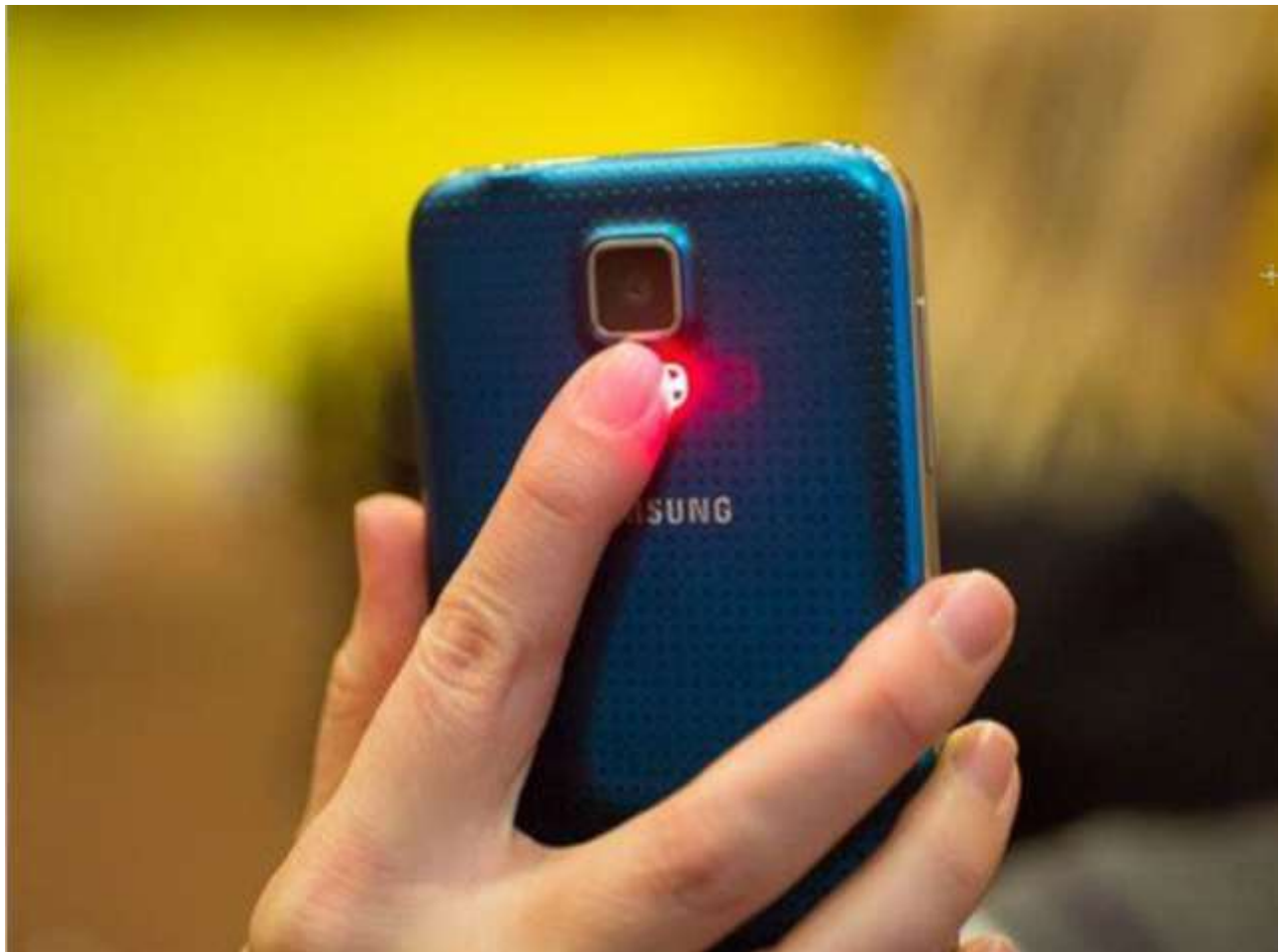
**NIHR** | Yorkshire and Humber  
Patient Safety Translational  
Research Centre











Constipation	Diarrhoea	Rectal bleeding	Loss of weight	Abdominal pain	Abdominal tenderness	Abnormal rectal exam	Haemoglobin 10–13g dl <sup>-1</sup>	Haemoglobin <10g dl <sup>-1</sup>	
<b>0.42</b> 0.3, 0.5	<b>0.94</b> 0.7, 1.1	<b>2.4</b> 1.9, 3.2	<b>1.2</b> 0.9, 1.6	<b>1.1</b> 0.9, 1.3	<b>1.1</b> 0.8, 1.5	<b>1.5</b> 1.0, 2.2	<b>0.97</b> 0.8, 1.3	<b>2.3</b> 1.6, 3.1	PPV as a single symptom
<b>0.81</b> 0.5, 1.3	<b>1.1</b> 0.6, 1.8	<b>2.4</b> 1.4, 4.4	<b>3.0</b> 1.7, 5.4	<b>1.5</b> 1.0, 2.2	<b>1.7</b> 0.9, 3.4	<b>2.6</b>	<b>1.2</b> 0.6, 2.7	<b>2.6</b>	Constipation
	<b>1.5</b> 1.0, 2.2	<b>3.4</b> 2.1, 6.0	<b>3.1</b> 1.8, 5.5	<b>1.9</b> 1.4, 2.7	<b>2.4</b> 1.3, 4.8	<b>11</b>	<b>2.2</b> 1.2, 4.3	<b>2.9</b>	Diarrhoea
		<b>6.8</b>	<b>4.7</b> 1.9, 5.3	<b>3.1</b> 1.9, 5.3	<b>4.5</b>	<b>8.5</b>	<b>3.6</b>	<b>3.2</b>	Rectal bleeding
			<b>1.4</b> 0.8, 2.6	<b>3.4</b> 2.1, 6.0	<b>6.4</b>	<b>7.4</b>	<b>1.3</b> 0.7, 2.6	<b>4.7</b>	Loss of weight
				<b>3.0</b> 1.8, 5.2	<b>1.4</b> 0.3, 2.2	<b>3.3</b>	<b>2.2</b> 1.1, 4.5	<b>6.9</b>	Abdominal pain
					<b>1.7</b> 0.8, 3.7	<b>5.8</b>	<b>2.7</b>	<b>&gt;10</b>	Abdominal tenderness



## AI AND ANALYTICS

Decision support | MHRA | QRISK |

TPP



**Ben  
Heather**

10 June 2016

Share this...

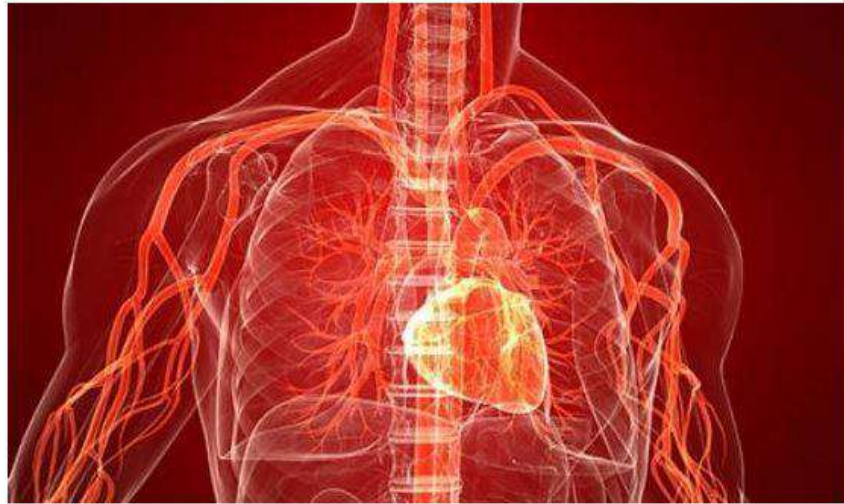


intelligence +

**Trusts:**

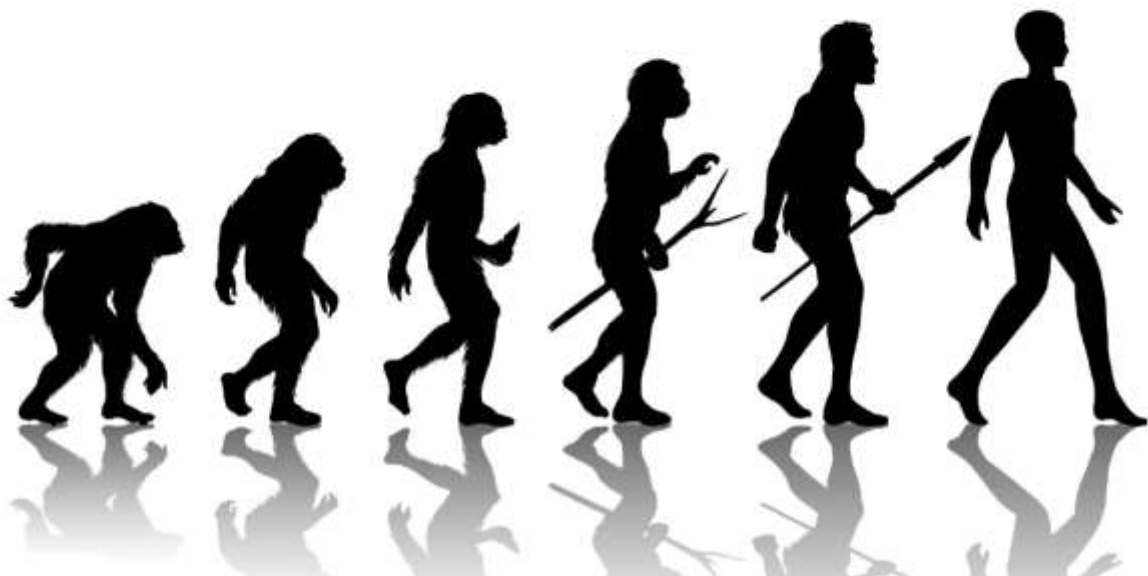
**Suppliers:**

## QRisk2 in TPP “fixed” but up to 270,000 patients affected



Up to 270,000 patients have been affected by errors in a cardiovascular disease risk digital calculator, which is being blamed on a “code mapping” issues.

## Evolution of safety theory...in games



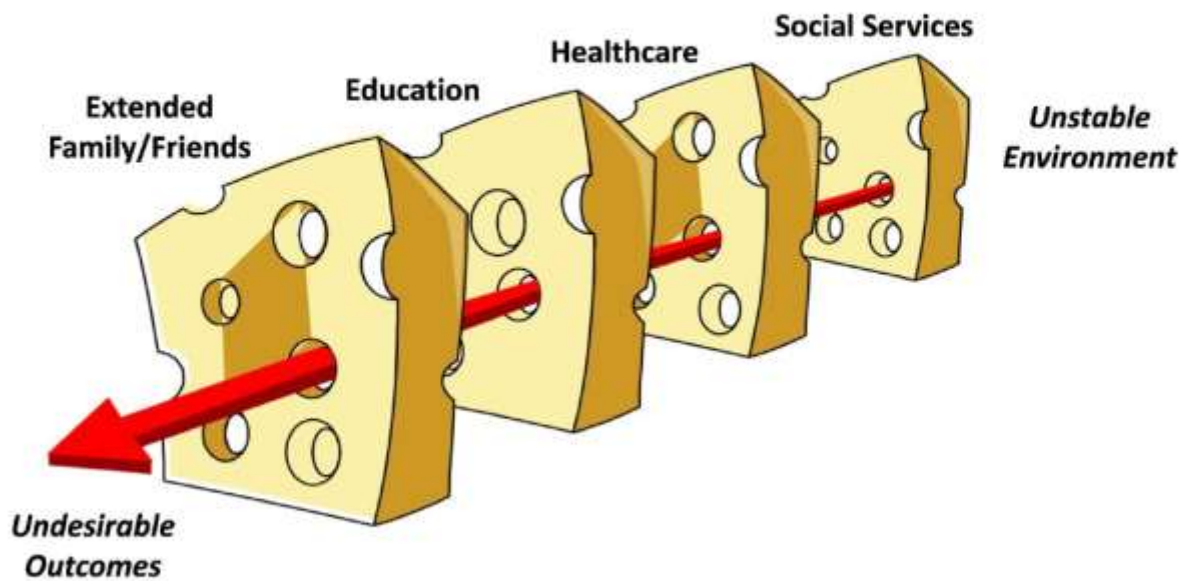


## Safety-1: Whack-a-mole





## Safety 1.5: Swiss cheese



**NIHR**

Yorkshire and Humber  
Patient Safety Translational  
Research Centre





## Safety-2: Pretend



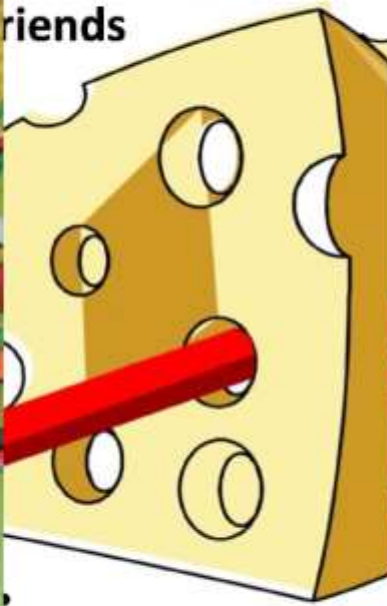
**NIHR** | Yorkshire and Humber  
Patient Safety Translational  
Research Centre





ded  
riends

Educa



# Avoiding Risk

## Attitude

No acceptable risk

## Need

Competent regulators and supervisors



Department  
of Health &  
Social Care

Policy paper

## Annex A: about Exercise Cygnus

Updated 5 November 2020

Contents

Exercise Cygnus was a cross-government exercise to test the UK's

**NIHR**

Yorkshire and Humber  
Patient Safety Translational  
Research Centre

# Managing Risk

## Attitude

Minimise damage

## Need

Competent teams



**NIHR**

Yorkshire and Humber  
Patient Safety Translational  
Research Centre

Photo by [Jay Heike](#) on [Unsplash](#)



# Embracing Risk

## Attitude

Inevitable danger

## Need

Competent individuals



# Risk vs. Uncertainty



# JCO® Clinical Cancer Informatics

An American Society of Clinical Oncology Journal

Enter words / phrases / DOI / ISBN / authors / keywords / etc.

[Newest Content](#) [Archive](#) [Special Content](#) [Authors](#) [Subscribers](#) [About](#) [ASCO Publications](#) [Career C](#)

[JCO Clinical Cancer Informatics](#) > [List of Issues](#) > [Volume 5](#) >

## SPECIAL ARTICLES

### Are Regulations Safe? Reflections From Developing a Digital Cancer Decision-Support Tool

Check for updates

[Ciarán D. McInerney](#) , PhD<sup>1</sup> , [Beverly C. Scott](#), MSc<sup>2</sup>; and [Owen A. Johnson](#) , MSc<sup>1</sup>

[Show More](#)

Creative Commons Attribution Non-Commercial No Derivatives 4.0 License:

<https://creativecommons.org/licenses/by-nc-nd/4.0/>

## OPTIONS & TOOLS

- [Export Citation](#)
- [Track Citation](#)
- [Add To Favorites](#)
- [Purchase](#)
- [Rights & Permissions](#)

## COMPANION ARTICLE

**NIHR**

Yorkshire and Humber  
Patient Safety Translational  
Research Centre



Ciarán  
@CMc\_PhD

...

Replying to @CMc\_PhD

Digital technology has revolutionised healthcare but the changes have not all been positive.

In this thread, I will speak about three blind-spots of digital health innovations, with particular focus on regulation and on patient safety.



10:32 AM · Jul 15, 2020 · Twitter Web App

# #1

Regulators do not control access and use of what they regulate.



Icon made by [Freepik](#), [Smashicons](#) and [Vitaly Gorbachev](#) from [www.flaticon.com](http://www.flaticon.com)



## #2

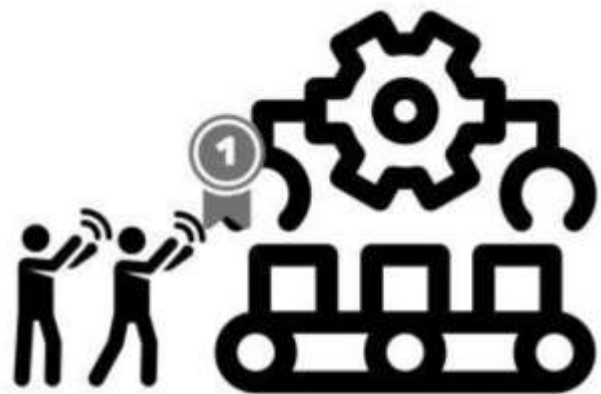
Safety regulators will always play catch-up because innovation is not regulated.



Icon made by [Freepik](#) and [Pixel perfect](#) from [www.flaticon.com](#)

## #3

Busy  $\neq$  Productive.  
Not all innovation is useful.



Icon made by [Freepik](#) and [Pixel perfect](#) from [www.flaticon.com](#)

# How can we improve our sense making, and decision making when it comes to safety?

**NIHR** | Yorkshire and Humber  
Patient Safety Translational  
Research Centre

## EU AND MEMBER STATE MEDICAL DEVICES REGULATION

**Christa Altenstetter**

*City University of New York*

EU regulation of medical devices grew out of the adoption in the mid-1980s of so-called *new approach* legislation, which affected 17 industrial sectors, including medical devices. The adoption of this new approach was a historic move made at the highest political levels. While this move was not free of conflict, EU members accepted the entire new approach legislative package in order to set in motion the single market, which was perceived to be in the national interest of each country. But once the package was enacted, conflict resolution in the medical devices sector shifted from the “high politics” level to highly specialized and technocratic committees, working groups, and issue networks (18).

Under old approach legislation, technical standards and specifications were written into directives. New approach legislation, by contrast, institutionalized a separation between law and technical standards. Instead, directives would rely on essential requirements<sup>2</sup> and the use of voluntary standards. However, at the demand of France and a few other coalition part-



## ANALYSIS

### IDEAL-D: a rational framework for evaluating and regulating the use of medical devices

High profile device failures have highlighted the inadequacies of current regulation. **Art Sedrakyan and colleagues** call for a move to a graduated model of approval and suggest a framework to achieve this goal

Art Sedrakyan *professor*<sup>1</sup>, Bruce Campbell *professor*<sup>2</sup>, Jose G Merino *clinical research editor*<sup>3</sup>, Richard Kuntz *chief scientific, clinical, and regulatory officer*<sup>4</sup>, Allison Hirst *researcher*<sup>5</sup>, Peter McCulloch *professor*<sup>5</sup>

Health and Safety are both dynamic systems

*Performance*

*Health*

*Safety*









PERGAMON

Safety Science 42 (2004) 237–270

SAFETY SCIENCE

[www.elsevier.com/locate/ssci](http://www.elsevier.com/locate/ssci)

## A new accident model for engineering safer systems

Nancy Leveson\*

## Systems Approach and Systems Engineering Applied to Health Care: Improving Patient Safety and Health Care Delivery

*Alan D. Ravitz, Adam Sapirstein, Julius C. Pham, and Peter A. Doyle*

*Risk Analysis, Vol. 29, No. 12, 2009*

## On the Complex Definition of Risk: A Systems-Based Approach

Yacov Y. Haimes\*

*Risk Analysis, Vol. 29, No. 4, 2009*

## On the Definition of Resilience in Systems

Yacov Y. Haimes\*



# Safety in Numbers

<https://safety-in-numbers.co.uk/>

