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ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI  
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ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES  
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ΕΒΡΟΠΕΪΣΚΑ ΑΣΟΪΑΪΑΝ Α ΝΑ ΣΤΑΡΣΗΤΕ ΒΟΛΝΗΧΝΗ ΛΕΚΑΡΗ  
ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE

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<b>Author :</b>	<b>Dr Hrvoje Sobat</b>
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A round table discussion about "Patient Safety in Intensive Care Medicine" was held in Vienna, Austria, on Sunday 11<sup>th</sup> October 2009, before the Opening Ceremony of the 22<sup>nd</sup> ESICM Annual Congress (programme attached as a part of this report).

The organizers of the meeting intended to involve the leadership of the majority of critical care societies from within Europe, but also many other leading representatives from around the World aiming to raise the profile of patient safety both on the political and scientific levels. The invitation letter was sent out together with the proposed draft text of the declaration on patient safety and the stakeholders were asked to submit their written comments.

I have attended the meeting on behalf of our organization with the intention to take part in the discussion and to sign the declaration as a representative of European hospital doctors. Although not all the invited organizations have sent their representatives the meeting hall was almost full. Interesting meeting program and the importance of this topic have raised a lot of interest and attracted many participants of the congress to attend. Among other invited speakers a patient organisation's representative has taken floor, but not a single speaker from the official health authorities appeared.

All the lectures were oriented towards the issues of patient safety in ICU's and mainly focused on new technologies and innovative drugs which will solve the majority of problems when invented or improved. Only few speakers were oriented on bad systems which cause dangerous mistakes and the ways one can avoid them by learning and improving the working process. Many medical equipment sale representatives have taken part in the discussions, trying to assure the audience aggressively that their products are manufactured in accordance with the highest safety standards and contribute most to the desired excellent treatment results.

When evaluating the importance of this meeting I can say that it was an expected step further of the famous one organised in Luxembourg in April 2005. After four years the international professional society for ICM has organised a meeting dedicated to stressing the value of the patient safety among the critically ill patients and to promoting safe procedures and further research in this field. It is of utmost importance to communicate this issue to the very last member of the profession.

As no written comments on the declaration were submitted, the draft proposal was accepted and I have signed it on behalf of the AEMH before the festive end of the meeting.



**- Round Table on Patient Safety -  
Sunday, October 11, 2009. Tentative programme**

- 12h00-13h00: Registration & Lunch buffet**
- 13h00-13h10: Welcome & opening remarks  
R. Moreno. ESICM President (Portugal)**
- 13h10-13h25: Patient safety : a priority for the European Commission  
A. Vassiliou, EU Commissioner *(to be confirmed)***
- 13h25-13h40: Patient safety: the WHO prospective  
I. Larizgoitia Jauregui, WHO**
- 13h40-13h55: Patient safety : the industry prospective  
M. Mussalem (ADVAMED President)**
- 13h55-14h15: Discussion**
- 14h15-14h30: A look into the nature and causes of human errors in the ICU  
Y. Donchin (Israel)**
- 14h30-14h45: Tracking sentinel events in the ICU.  
A. Valentin (Austria)**
- 14h45-15h00: Coffee Break**
- 15h00-15h15: Improving patient safety through information technology  
JD. Chiche (France)**
- 15h15-15h30: Improving patient safety through clinical research.  
C. Sprung (Israel)**
- 15h30-15h45: Improving safety of practice through education  
C. Gomersall (Hong-Kong)**
- 15h45-16h05: Discussion**
- 16h05-16h20: ICU volume, models of care and patient safety  
D. Angus (USA)**
- 16h20-16h35: Challenges of improving patient safety in developing countries  
E. Silva (Brazil)**
- 16h35-16h50: Discussion**
- 16h50-17h00: The path to improve patient safety in the ICU – Closing remarks  
A. Rhodes ESICM President-Elect (UK)**
- 17h00-17h15: Signature of the Vienna Declaration**



## Declaration of Vienna

1. We, the Leaders of the Societies representing the medical specialty of Intensive Care Medicine, met in Vienna on 11 October 2009. Together with the representatives of the main institutions and stakeholders who speak up for patient safety, we declare...

2. We recognize that patient and Healthcare team safety is of paramount importance to every practicing health professional and represents one of the major challenges in modern day medicine. This affects the lives of women, men, and children in every country. Without a safe environment it is not possible to provide the quality of care that we all aspire to. This is especially true in Intensive Care Medicine, given the very fragile nature of the patients we care for, often in the extremes of age, unconscious and with minimal margins for error imposed by their deranged physiology. This global problem requires a global solution.

3. We believe that improving levels of safety for critically ill patients is achievable in all units and in all countries, irrespective of the available resources. If the safety of our patients is increased, then the quality of care that we can provide will improve.

4. We strongly believe that increasing patient safety is as crucial to the development of medical practice as the increase in the effectiveness of our interventions.

5. We have today therefore pledged to do whatever is necessary to:

- ✓ Increase the knowledge of the causes and reasons for failures to provide a safe

- environment in the Intensive Care Unit.
- ✓ Improve our understanding of the consequences of failure to provide a safe environment for critically ill adult and children and the health care professionals caring for these patients.
- ✓ Develop and promote criteria that can assess safety in the intensive care unit.
- ✓ Further our ability to translate the knowledge of safety into improving the quality of care that can be provided to our patients.

By acting together to fulfill these pledges we will improve the safety of intensive care practice and thereby increase the quality of care.

6. Through the design and promotion of safer and even more efficient devices and drugs, we acknowledge that industrial partners have a pivotal role to play in improving patient safety. With the Signature of this declaration, manufacturers of biomedical, pharmaceutical and biotech companies pledge to:

- ✓ Engage in efforts to improve the safety profile of their products.
- ✓ Provide resources to facilitate the safe use of their products.
- ✓ Release, as soon as they become available, any information related to safety concerns of their products to healthcare professionals and regulatory agencies.

7. The agreements reached today will enable us to develop safety criteria that can be used by Intensive Care Units around the world to improve their safe practices and increase the quality of care provided to the benefit of all of our patients.