SEIPs and Actions Management

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Systems Engineering Initiative for Patient Safety - SEIPS



MODEL ROOTED
IN HUMAN
CENTRED
SYSTEMS
ENGINEERING*
THAT LOOKS AT
THE ENTIRE
SYSTEM AN
INCIDENT TOOK
PLACE WITHIN.



INCLUDES X3
COMPONENTS



WORK SYSTEM



PROCESSES



OUTCOMES



DEFINITIONS



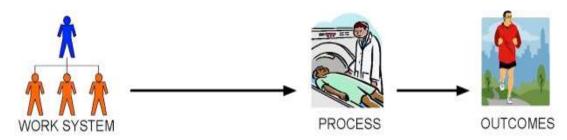
HUMAN-CENTERED ENGINEERING

(HCE) IS A
MULTIDISCIPLIN
ARY FIELD THAT
USES DESIGN
THINKING TO
CREATE
PRODUCTS AND
SYSTEMS THAT
MEET THE NEEDS
OF USERS.



HUMAN FACTORS, ALSO KNOWN AS ERGONOMICS,

IS THE SCIENTIFIC STUDY OF HOW HUMANS INTERACT WITH OTHER ELEMENTS OF A SYSTEM AND HOW TO APPLY THAT KNOWLEDGE TO DESIGN PRODUCTS, PROCESSES, AND SYSTEMS. THE GOAL IS TO IMPROVE THE WELL-BEING OF

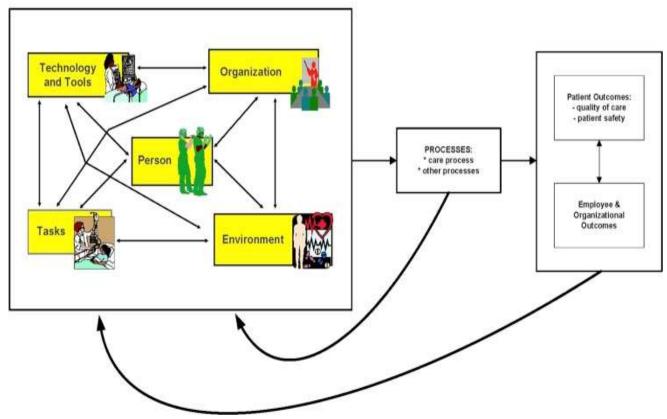


The SEIPs Mod

The Work System

The Process

The Expected Outcome





• SEIPs Categories by Contributory Factors

Tier 1	Tier 2	Individual staff factors (Human Factors)	Components
Person Factors			
HF	PH	Physical health	• General health (nutrition, hydration, wellness, fitness)
			• Health related conditions (eg eyesight, dyslexia)
	МН	Psychological/ Mental health	• Mental health
			• Mental alertness
			 Motivation level (boredom, complacency, low job satisfaction)
			• Stress / Burnout
	SD	Social domestic factors	• Domestic (family related)
			• Lifestyle (financial, housing, etc)
			• Language
	PF	Personality factors	• Confidence
			• Risk awareness/risk tolerance
	SO	Social factors	• Motivation and values
			• Beliefs and expectations
			• Attitudes
			• Habits
	CF	Cognitive factors	• Focus/Attention/Memory /Confusion
			• Perception
			Reasoning and decision-making
			• Group influence
			• Workload (underload/overload/well-balanced)

Tier 1	Tier 2	Individual patient factors	Components
Person Factors			
PT	PF	Physical factors	Physical health/condition
			Nutrition/hydration
			Age related
			Body mass related
	SO	Social factors	 Cultural/religious beliefs
			Language/communication
			Lifestyle choices
			Life events
			Living accommodation
			Support networks
			 Social protective factors (relevant to mental health services)
			Risk tolerance
			 Engagement/motivation/compliance/concordance
			 Interpersonal relationships (staff-patient; patient-family; staff-family)
	MH	Psychological factors	Mental health
			Mental capacity
			Learning disability
			Intent (relevant to mental health services)

Tier 1	Tier 2	Task factors	Compo	onents
Person ~Factors				
TF	CC	Clinical condition	•	Pre-existing co-morbidities
			•	Complexity of condition
			•	Seriousness of condition
			•	Options available to treat condition
	PP	Plans, guidelines, policies, procedures and protocols	•	Informative
			•	Instructional
			•	Representative
			•	Routine use
			•	Usability
			•	Currency
			•	Accuracy
			•	Availability
			• irrel	Accessibility (ambiguous, complex, evant, incorrect)
			•	Monitoring
			•	Review
			•	Targeting/focus (ie audience)

Tasks	DM	Decision-making aids	• Available
			• Accessible
			• Working
			• Accurate
			• For prioritisation of tasks
			Access to specialist advice
			 Access to technical information, flow charts and diagrams
		Procedural or Task design	
Tasks	TD	and clarity	• Task complexity
			• Task memorability
			• Understandable
			 Agreed with staff (feasibility)
			• Time allocation
			 Task sequencing/stage sequencing
			 Workload (under/over/balanced)
			 Compatibility of tasks/task stages
			• Competing task demands
			• Feedback from the task
			• Transferability to/from other situations
			• Influence on task/outcome
			• Automation
			 Audit, quality control, quality assurance

Tier 1	Tier 2	Workplace factors	Components	
Work System				
EN	EF	Environmental factors	• Capacity	
			Fixture or fitting	
			• Separation	
			• Safety	
			• Cleanliness/hygiene	
			• Temperature	
			• Lighting	
			• Noise levels	
			 Distractions (audio) & Distractions (visual) 	
			• Ligature/anchor points	
	DS	Design of physical environment	 Work area design (eg size, shape, visibility, screens, space, storage) 	
			Security provision	
			• Lines of sight	
			 Use of colour contrast/patterns (walls/doors/flooring, etc) 	
			 Space design (adjustable furniture, panic buttons, positioning, etc) 	
	AF	Administrative factors	Administrative work systems	
			Administrative infrastructure (phones, bleep systems, etc)Administrative support	

Tier 1	Tier 2	Equipment and technology factors	Components
Technology and Tools			
EQ	DS	Displays	Information/feedback available
			Information clarity
			• Information consistency
			• Information legibility
			Information Interference
			• Information displays (colour, contrast, anti-glare screens, etc)
	IM	Integrity and maintenance	Working order
			• Reliability
			• Safety features (fail to safe, etc)
			Maintenance programme
			• Emergency back-up services (power, water, piped gases, etc)
	PA	Positioning and availability	Availability and /or Accessibility
			• Position/placement
			• Storage
			Emergency backup equipment
	UD	Usability/design	• Controls
			• Intuitiveness
			• Use of colour & /or Use of symbols
			• User manual
			Detectability of problems
			 Use of items which have similar names or packaging
			• Compatibility

		Organisation Team and social	
Tier 1	Tier 2	factors	Components
Work System			•
OT	СТ	Culture	Approach to newcomers
			Approach to adverse events
			Approach to conflict
			Approach to rules/regulations
			Approach to seeking support
			Approach to interprofessional challenge
			• Interpersonal relationships
			• Power relationships
	TS	Team structure and consistency	Shared understanding
			• Familiarity
			• Mutual respect
			Clarity of roles and responsibilities
			Congruence of roles and responsibilities
			• Informal support networks
	LT	Leadership	Clinical leadership
			Managerial leadership
			Leadership impact
			Leadership decision-making
			Timeliness of leadership action
			Respect for leadership
			Formal support networks for staff

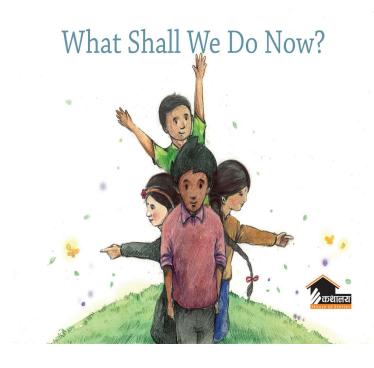
MC	CM	Communication management	 Communication strategy and policy documents Involvement of patient/family/carers in treatment and
			 Involvement of nationt/family/carers in treatment and
			decisions
			 Communication of risks to patient/family/carers
			Communication of risks to staff
			Communication of risks to the board
			• Information from patient/family/carers
			• Communication flow to staff up, down and across
			Communication with other agencies (partnership working)
			Measuring effectiveness of communication
	VC	Verbal communication	Tone of voice
			Style of verbal communication delivery
			• Use of language
			• Specificity
			• Direction
			• Channel/route
			Verbal communication aids/equipment
	WC	Written communication	• Readability
			Accessibility/availability
			• Collated
			• Completeness
			• Contemporaneous
			• Accuracy
			• Currency
			Circulation of written information
			Patient identification
			Information to patients
	NV	Non-verbal communication	• Body language/gestures/facial expression

Tier 1	Tier 2	Operational Management Factors	Components
Work System	SA	0.5.1	Rule compliance
OM	SA	Safety focus	
			Dearing with fishe from past instants
			Awareness of current practice
			Adherence to current practice
			Empowerment of staff to act
			Professional Curiosity
	WK	Work planning and delivery	Risk management plans
			• Scheduling
			Incentive schemes
			Contingency planning
	ST	Staffing levels and skill mix	• Skill mix
			Staff to patient ratio
			 Workload/weighting/dependency
			Temporary staff
			Staff turnover
	WL	Workload, shift patterns, hours of work	Working hours including Work breaks
			• Workload (under/over/balanced)
			Extraneous tasks
			Social relaxation, rest and recuperation
	TD	Training design	Training needs analysis
			Training design
			Training/education content
			Targeted training
			Style of delivery
			Time of day provided
	TA	Training Availability / Accessibility	Training availability/accessibility
	ın	realizing Availability / Accessibility	Core skills training / On the job training
			• Team training
			Refresher training
	SS	Staff supervision	• Orientation
			Personal supervision
			Monitoring of supervision (assessment) • Mentorship
	SC	Staff competence	• Knowledge
			• Skill
			• Experience
			Familiarity with task

Hierarchical structure (discussion, problem-sharing, c) Roles, responsibilities and accountability Multidisciplinary working Clinical/managerial approaches Maintenance Service-level agreements/contractual arrangements Safety terms and conditions of contracts Safety focus Finance focus External assessment focus Workforce resource management Estates and technology resource management
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External assessment focus Workforce resource management
Workforce resource management
Estates and technology resource management
Safety/efficiency balance
Commitment to safety
Openness of culture and communication
Risk tolerance
Approach to escalation of concerns
Leadership response to whistleblowing
Organisational processes (formal)
Organisational processes (informal)
Processes between/spanning organisations

Tier 1	Tier 2	External context factors	Components
Work System Environment			
EX	NT	National guidelines and policies	 Impact of national policy/guidance (DHSC/professional colleges, etc)
			• Locum/agency policy and usage
			• Contractor related
	EC	Economic and regulatory context	• Service provision
			Bed occupancy levels (opening/closures)
			Private finance initiative related
			• Equipment loan related
			• Financial constraints
			Resource constraints
	SO	Societal factors	• Values
			• Beliefs

Resources and Questions



- Standard Operational Process (SOP) for Roles and Responsibilities for Action Management 27.09.24 (002).docx
- SEIPs Categories.xlsx