

Speech Safety Collaboration launch 26 March 2018 RW

Good morning. It feels a little strange to be here having a party at 10h30 on a Monday morning! But then again, this is an extraordinary gathering. Just look around you. I see professors, nurses, doctors, cleaning staff, business people, managers, engineers, students... even an architect! And each person here is either interested in or already involved in some way in patient and provider safety. We have a common goal: we aim to make the clinical workplace a safer place for all of us and for our patients.

So why this party on a Monday? Well, we are gathered here today to mark a specific moment: to celebrate the rededication of this beautiful space and to celebrate the growing relationship between our collaborating partners.

This moment was made possible through the vision and support of many people. The space where we are now standing was loaned to UCT by GSH many years ago, thanks to clinicians like Prof Janet Seggie and Sr Maureen Ross, who argued for a place where junior medical students could learn clinical skills without compromising patients. Another important moment in framing our professional identity occurred in 2012, when Prof Gonda Peres, deputy Dean of Education, brought the MBChB and Health&rehabilitation skills spaces under one governance umbrella. Finally, thanks to Prof Perez and Prof Bongani Mayosi, our Dean, in 2016 Clinical Skills found an interdisciplinary academic and scholarly home in the newly-formed Department of Health Sciences Education.

As a UCT academic entity, it is our responsibility to develop, implement and evaluate curricula. We teach procedural skills ranging from phlebotomy to resuscitation, using simulation-based methods and modern equipment. Despite students passing their procedural skills exams well, workplace-based feedback such as needle stick injuries stats suggest that technical competence (knowledge and skills) does not necessarily translate into safe clinical practice. Our protocols and training, while academically excellent, sometimes go out of sync with those used in the surrounding hospitals. Students seem to need more repetition and critical framing in different contexts. We started to realize that rather than technical competence, our students need to develop an attitude, a lifelong culture of Safety, that would endure beyond the confines of the skills lab.

Culture refers to a set of values and beliefs that are rooted in the shared history of a particular community. Culture cannot exist outside of community. To develop a culture of safety in our students, we must move beyond traditional and institutional roles to actively build a shared history, a community of practice. This is not without challenges. Getting to know each others' systems and processes, finding synergies, building trust relationships- all these things require effort and perseverance. Creating a community requires a willingness to share our resources, and to recognize the value that each party brings to the collaboration. Collaboration is easily derailed through miscommunication or neglect or fear of being taken over. Of course, many of you in this room may have been working across sectors and professions for years, and we hope you will share your expertise with us.

Our collaborations so far have focused on 3 main areas:

1. multidisciplinary resuscitation and debriefing training, led by a group of simulation-trained UCT, GSH and Red Cross doctors and nurses. Here the safety agenda focus is on communication, teamwork, use of equipment and accurate documenting of an adverse/risk event

2. Sharps, cannulation and infusion pump training: certainly, as a medical student I never learnt to set up these machines, and
3. infection prevention & control, whereby we hope to bring the authority of the GSH IPC nurses right into the classroom.

I don't want to say more in case I spoil the fun, and I will leave it to the different partners to explain further! Please keep in mind that the demonstrations you will see are not supposed to be examples of our excellence but rather areas where we have noticed the greatest need for collaboration. What is important, is how we are tackling these problems, which incidentally are universal to health care in both richer and poorer settings.

In summary: to BD: thank you for your vision and your passion for education, which provides UCT not only resources but also expertise and networks. UCT's partnership with you enable us to share our resources and networks further with our neighbors and the broader safety community. I look forward to many productive interactions here on the Safety Agenda, especially with our GSH colleagues from Nursing and Quality Assurance.

To my Clinical Skills team: your dedication and generous spirit bring me much joy.

To everyone who has joined us here today: As educational experts, leaders of industry and experts in clinical practice, we have the potential to be a formidable community. This beautiful space symbolizes our "Field of Dreams"; build it, and they will come!