

Measuring Patient Harm in Canadian Hospitals

Patients expect hospital care to be safe, and for most people it is. Despite health professionals' focus on safety, a small proportion of patients experience some type of unintended harm as a result of the care they receive. Concern over patient safety and how patients can be harmed during their hospital stay has grown steadily over the past decade.

Governments, national and provincial organizations, individual health regions and hospitals are all working along with patients to improve safety in hospitals. Tracking and reporting harmful events is vital to improvement efforts. Historically, reporting has been mostly voluntary and focused on particular risks such as infections. There has not been a single measure that gives an overview of harm in Canadian hospitals — until now.

The Canadian Institute for Health Information (CIHI) and the Canadian Patient Safety Institute (CPSI) have developed a new measure of harm occurring in Canadian hospitals, and a national picture is now available.

Findings show that in 2014–2015

- Patients suffered potentially preventable harm in more than 138,000 hospitalizations in Canada,ⁱ or about 1 in 18 hospitalizations (5.6%).
- Of the patients who experienced harm, about 20% experienced more than 1 harmful event while in hospital.

There are 31 types of harm captured in the measure (see the figure). They were selected because they are associated with evidence-informed practices that can reduce the likelihood of their occurrence. It is important to note that the measure does not cover all harmful events that happen in hospitals — only those that fit into at least 1 of the 31 types of harm. For the harm to be included in the data capture, it must have occurred while the patient was in hospital and required treatment or extended the patient's stay. Because the measure uses administrative data that CIHI collects regularly, it is relatively easy to update.

i. Canada total excludes Quebec and selected mental health diagnoses.



Additional resources

The following companion products are available on [CIHI's website](#):

- Report
- Technical report
- Infographic



Talk to us

For data-specific information:

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For media inquiries:

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Measurement alone does not decrease harm. To assist hospitals in their patient safety efforts, an improvement resource has been developed to link each of the 31 types of harm to practices that can help reduce their occurrence. The [improvement resource](#) describes what clinicians can do to improve safety for the different types of harm. It will allow care teams to spend less time researching what they need to do and more time doing it.

No single action or individual can ensure safe care, but through collaboration and evidence-informed practices, health care can be made safer for all Canadians. Clinicians, hospital management, quality and decision-support representatives, and patients and their families all need to have a hand in moving toward safer care for all.

Figure Hospital Harm Framework

