



Consumers Advancing Patient Safety Fact Sheet

PATIENT SAFETY – IT'S AN EMERGENCY

In 1999, the Institute of Medicine (IOM) shocked consumers with Error in Medicine, a report that estimated medical error to be as high as the 4th leading cause of preventable death in the United States, responsible for the loss of up to 98,000



lives a year in US hospitals alone. The IOM called upon the health system to make patient safety an urgent national priority and set a target of 50% reduction in preventable harm in

five years. Subsequent studies suggest that target was not reached, and that the number of preventable deaths may be much higher than the IOM estimate. In fact, the Centers for Disease Control and Prevention estimates that nearly 100,000 people in the US died from hospital-acquired infection alone in 2006, suggesting that the IOM's original estimate is indeed too low.

Improving patient safety has now become an international movement spurred on by the World Health Organization (WHO), among others. We are working hard to raise awareness of risk among consumers and create opportunities for them to get involved in changing healthcare. CAPS is



lowering barriers, changing the dialogue and creating a new partnership with healthcare providers and policymakers where patients are at the center. We capture

the wisdom of patients who have experienced harm and use it to fuel positive, collaborative change with healthcare organizations that value consumer input and interaction.

WHO IS CAPS?

CAPS was formed in 2003 as a result of a workshop supported by the US Agency for Healthcare Research and Quality (AHRQ) that brought consumers, healthcare providers, accrediting agencies, educators and legal system stakeholders together to achieve specific, patient-focused patient safety goals. CAPS has become recognized and highly respected in the global patient safety movement, building highly effective partnerships with key national and international healthcare institutions and policymakers.

Membership in CAPS is free and open to anyone that shares our values. Our website (www.patientsafety.org) provides free access to a searchable database of resources, tools and education materials, as well as downloadable consumer engagement toolkits.

CAPS is committed to the truth, open and honest communication, empathy and collaboration, and to accountability and forgiveness. We are systems-oriented, patient-centered and values-driven.



OUR VISION

CAPS envisions a partnership between consumers and providers to create global healthcare systems that are safe, compassionate and just.

OUR MISSION

CAPS' mission is—

- To be a champion for patient safety in a new healthcare culture.
- To be a voice for individuals, families and healers who wish to prevent harm in healthcare encounters through partnership and collaboration.
- To teach the healthcare community what consumers and providers need to know whenever they interact within healthcare systems.

WHAT DOES CAPS DO?

CAPS is consumer-led and forms unique partnerships through appreciative collaboration to achieve common goals. CAPS recruits consumer partners who work with providers, policymakers and other healthcare stakeholders to develop authentically patient-centered programs and foster change. At the local level, CAPS convenes invigorated communities that identify goals and achieve buy-in, develop action plans and design new initiatives and tools to engage consumers as partners. With Aurora Health Care in Wisconsin and Northwestern Memorial Hospital in Chicago, CAPS has created a model for and demonstrated the value of community-based patient-provider partnerships.

Internationally CAPS worked to develop, launch and lead Patients for Patient Safety, one of the first “action areas” of the World Health Organization’s World Alliance for Patient Safety (WAPS). CAPS also works closely with the International Alliance of Patients’ Organizations.

CAPS leadership serve on boards or committees of the National Quality Forum, WAPS, The Joint Commission, the National Transitions of Care Coalition and AHRQ, as well as several editorial boards.