

Learning with the wisdom of the front line care

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The launching of National Patient Safety Program (PNSP) in April 1, 2013, through the Minister's Office/ Ministry of Health Ordinance No. 529 initiated a period of intense mobilization for the implementation of safe practices, with the creation of Patient Safety Nuclei (NSPs) in health facilities, and a greater appreciation of risk management, especially in hospitals. The PNSP based on activities already performed by Universities, the Brazilian Network for Nursing and Patient Safety (REBRAENSP), the Oswaldo Cruz Foundation (Fiocruz), the National Health Surveillance Agency (ANVISA), by the Institute for Safe Medication Practices (ISMP Brazil), and by reference hospitals already internationally accredited, among other contributors. In 2013, Brazil had already adhered to the two World Health Organization (WHO) for the Security of the Patient challenges: Hand Hygiene and Safe Surgery. The National Patient Safety Program launches then six basic protocols, including two WHO challenges, as well as Fall Prevention, Pressure Injury Prevention, Correct Patient Identification and Safe prescription, use and management of medicines. Patient Safety as a public health policy is assumed by The Ministry of Health 14 years after the publication of "To err is human: Building a Safer Health System" and 9 years after the World Health Organization's launches the "World Alliance for Patient Safety". An adequate information on the occurrence of adverse events was not available in the country in 2013 and most health facilities did not have a professional healthcare management area or sufficient financial resources. On the other hand, in the same year the publication of the "Annals of Internal Medicine" recommends with scientific evidence, innumerable safe practices, evaluating ten years of its use, and presenting its effectiveness in reducing the occurrence of adverse events in health care. Health care facilities, especially hospitals, have faced the challenge of educating their teamwork for Science of Patient Safety since its launch, enabling a basic management structure to support the implementation of the protocols and to discuss how to do it instead of why to do it. How to implement safe practices in diverse contexts without, in most scenarios, professionals with expertise in improving care. The nursing that plays a key role in all stages of care delivery (planning, implementation and evaluation), is inextricably linked to the efforts on making health care safer and more effective in Brazilian healthcare institutions. Nowadays we celebrated ten years of the Brazilian Network for Nursing and Patient Safety creation and their multiple activities. The REBRAENSP through its National Coordination and numerous poles / nuclei was able to articulate and stimulate nursing action in favor of Patient Safety, producing materials, allowing benchmarking, and organizing meetings that have

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encouraged not just nursing, but health organizations and multidisciplinary teams as a whole. The National Patient Safety Program adopted April as the Patient Safety month, and since the first anniversary of the Program, educational activities, events and the launching of publications has been held in the same month. For this reason, the initiative of the Southern Brazilian Nursing Magazine (RGE) in launching of a special issue dedicated to Patient Safety as an April activity for Patient Safety in 2018, and the tenth anniversary of REBRAENSP, should be celebrated. The call for papers has as its motto the safe practices envisaged by the PNSP also by the International Patient Safety Goals, as well as the creation of the Patient Safety Nuclei. Over one hundred articles submitted and thirty-four were accepted for publication. Accepted articles and reports of experience fulfilled all the practices defined in the call for papers, with emphasis on effective communication, safe surgery, culture and climate of safety from the perspective of nurses, and creation and implementation of Patient Safety Nuclei. Articles on Effective Communication in different areas of care shows the crosscutting issues of the theme and how essential is the improvement of communication to ensure that may be incorporated protocols into the work of the teams in professional practice. The works on Safe Surgery around the implementation of the Surgical Safety Checklist shows how necessary this tool is to guarantee technical standards, but also on improving teamwork and effective communication in the Surgical Center. The articles on Safety Culture and Climate focused mostly on the environment of the Surgical Center, where different professional cultures and power asymmetries constitutes real barriers to safe care. Lastly, the work related to the Patient Safety Nucleus (NSP) reflected the importance of the organizational structure and the possible assistance priorities that can be defined by the NSPs. Almost all the articles and experience reported refers to hospital care, but we would like to emphasize on Patient Safety in Primary Care work: the perspective of nurses in the Family Health Strategy. Its important reinforce that 70% of patients are attended in primary care, and all adverse events that occur in this area of care should be studied better, and specific prevention measures implemented. We congratulate the Editorial Board of RGE and all the accepted articles authors, for their effort on evidence-based research focused on the front line care. On behalf of the Brazilian Society of Quality Care and Patient Safety - SOBRASP, created in December 2017, we appreciate the invitation to write the Editorial of this special and relevant number.