ARMSTRONG INSTITUTE
FOR PATIENT SAFETY AND QUALITY

# Principles of Safe Design

## CUSP integrates adaptive and technical work

Healthcare organizations around the world are increasingly focused on patient safety and healthcare quality. While healthcare providers are committed to improvement efforts, many struggle to create and sustain positive change. The Comprehensive Unit-based Safety Program (CUSP) helps providers achieve the lasting improvements they seek.

You can redesign your care system through *technical* and *adaptive work* to improve patient safety and eliminate preventable harm. Technical work changes procedural aspects of care that can be explicitly defined, such as summarizing the evidence for VTE prophylaxis. Adaptive work changes the attitudes, values, beliefs and behaviors of the people who deliver care.

Adaptive work can be discouraging and nebulous. Creating a VTE prophylaxis protocol is far easier than managing staff's attitudes and values, or engaging senior executives in patient safety efforts. You may be tempted to focus on technical work, and leave complex adaptive problems unaddressed. Yet many change efforts fail because adaptive work is neglected: An evidence-based protocol (technical work) will only impact outcomes if staff understand, value, and prioritize use of the protocol (adaptive work).

The five steps of CUSP bring adaptive work into the change process and help your team improve your unit's safety culture. By integrating CUSP with technical interventions, your team can achieve real and sustainable improvements in safety.

### CUSP in practice

In 2004, more than 100 intensive care units in the State of Michigan implemented CUSP in their celebrated work to eliminate central line-associated bloodstream infections. Since their success, thousands of units nationwide have used CUSP to target a wide range of safety problems: patient falls, hospital-acquired infections, medication administration errors, among others.

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## References

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