

# PLUS study

Improving safety culture in Swiss healthcare organisations



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# What is the PLUS study about?

**PLUS is a nationally mandated feasibility study examining whether and how a structured approach to safety culture can be implemented in Swiss healthcare organisations in practice.**

## **PLUS as a feasibility study**

- Focus on learning, testing, and refinement
- No performance measurement or benchmarking
- Results inform national decision-making on next steps

## **PLUS as an intervention**

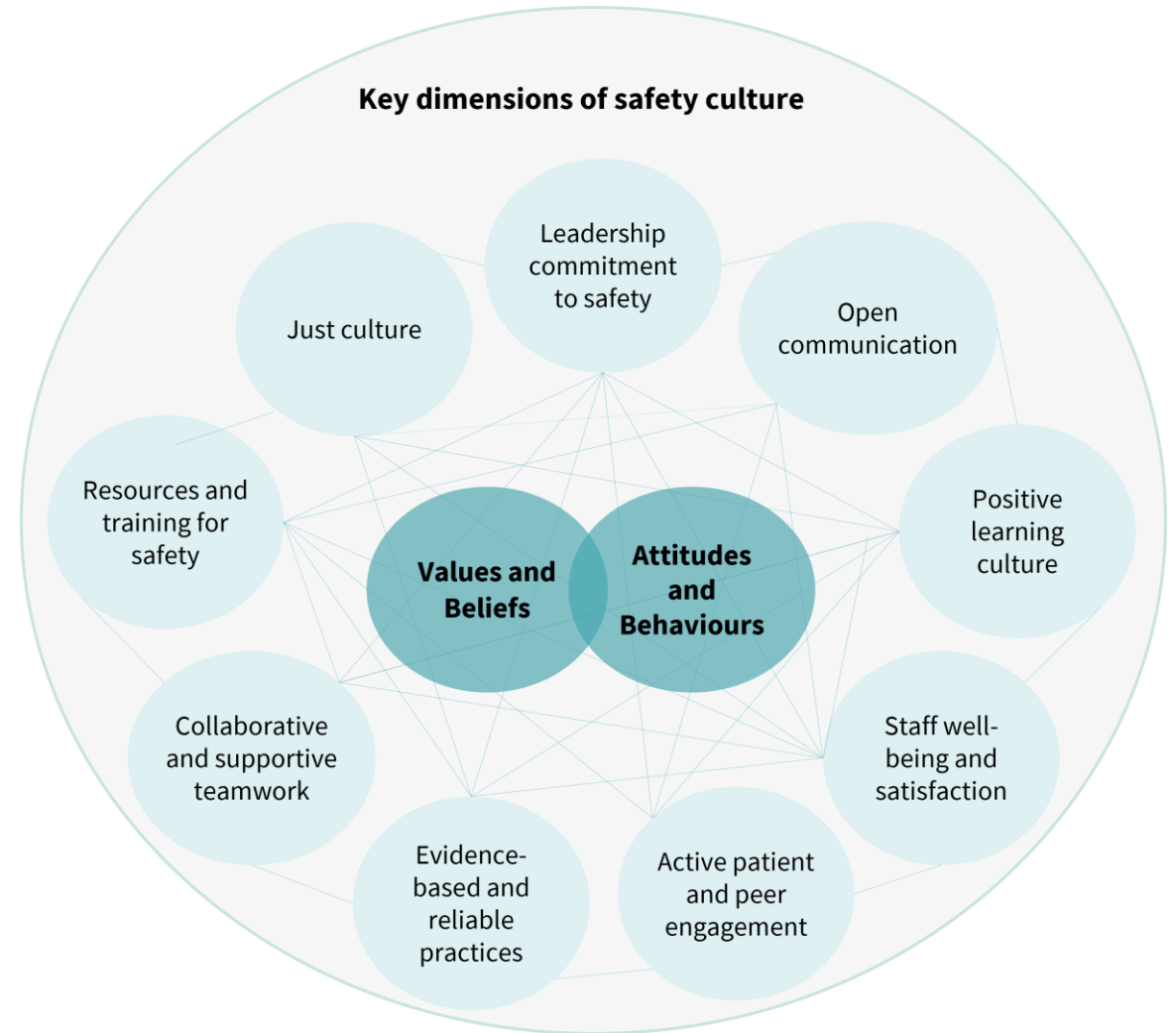
- Promotes co-creation, empowerment and dialogue
- Supports organisations in translating assessment into locally appropriate actions
- Requires active leadership involvement

# What is safety culture?

A safety culture reflects “how we do safety here” : how people think, act and work together to keep patients safe.

It is the foundation for safe, high-quality patient care, shaped by shared values, attitudes and behaviours at all organisational levels.

It comprises nine interrelated dimensions and is strengthened through collective effort and learning.



# Why the PLUS study?

- Safety culture is a key prerequisite for patient safety and quality of care
- To date, there is no nationally tested, structured approach für healthcare organisations
- Against this background, a structured approach (PLUS) was developed.

PLUS addresses this gap by testing:

- whether such an approach is practical in healthcare settings;
- whether it is acceptable to professionals and organisations; and
- which resources and conditions are required for implementation.

# What is the PLUS intervention

**PLUS is a structured, collaborative approach that helps healthcare organisations turn safety culture assessment results into practical actions by identifying areas of priority.**

- assess and reflect current safety culture
- define locally relevant priorities
- translate reflection into learning and practical actions

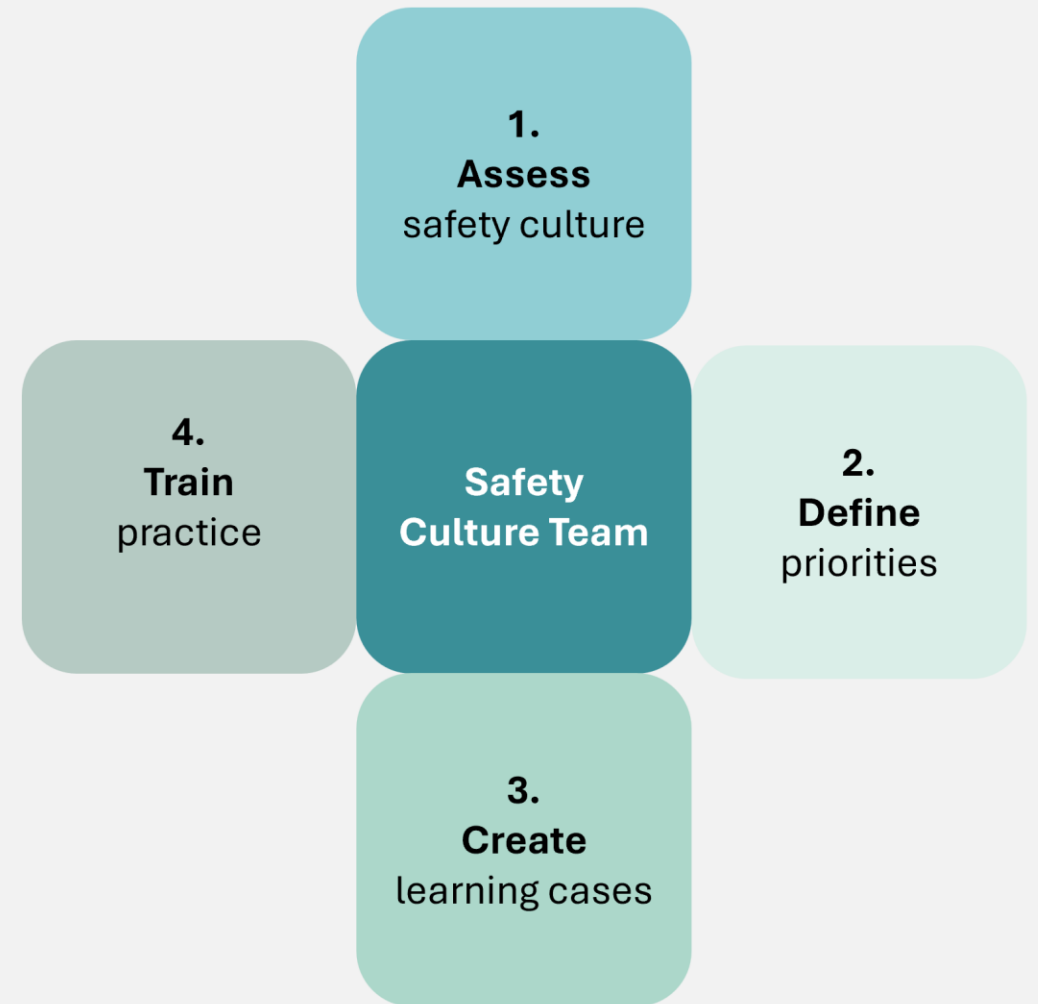
## The PLUS Intervention (6 months)

### Safety Culture Team

Brings together representatives from strategic leadership, clinical management, healthcare professionals, and quality management, with optional patient or peer representatives.

The team ensures open communication, embeds safety culture in daily practice, and coordinates all steps of the PLUS intervention.

Step	Key activities
<b>1. Assess safety culture</b>	<ul style="list-style-type: none"><li>• Conduct safety culture survey</li><li>• Evaluate maturity level</li></ul>
<b>2. Define priorities</b>	<ul style="list-style-type: none"><li>• Review results and define at least two improvement priorities</li></ul>
<b>3. Create learning cases</b>	<ul style="list-style-type: none"><li>• Select relevant clinical cases based on the defined priorities</li><li>• prepare them for learning and training</li></ul>
<b>4. Train practice</b>	<ul style="list-style-type: none"><li>• Conduct joint training (basic training and learning cases)</li><li>• Define concrete actions</li></ul>



# Co-design of the PLUS-intervention

The PLUS intervention was developed through a co-design process and informed by evidence from scoping reviews. It is underpinned by the following principles:

- Applicable and adaptable across diverse healthcare settings
- Enables organisations to focus on locally relevant safety culture priorities
- Promotes co-creation, dialogue and learning
- Designed for sustainability in a changing healthcare environment

# Why participate in the PLUS study?

## **Influence on national policy and future directions**

- Take on a pioneering role in testing a structured national approach to safety culture
- Actively shape future strategies and policy frameworks

## **Benefits for own organisation**

- Strengthen shared understanding and accountability for safety culture across professions
- Receive structured support to advance safety culture in a way that fits the organisation's context
- Move beyond surveys to dialogue, joint reflection and learning
- Embed safety culture sustainably into organisational processes and everyday practice

# What participation means for organisations?

Participation in the PLUS study requires a limited, clearly defined commitment:

- Designate one local contact person to coordinated participation
- Sign a participation agreement
- Establish a small, interdisciplinary safety culture team
  - *Strategic management, quality representative, operational leadership, and staff representatives*
- Participate in a defined number of structured coordination meetings (monthly)
- Contribute practical experience and feedback

*Participation is time-limited, transparent, and based on partnership.*

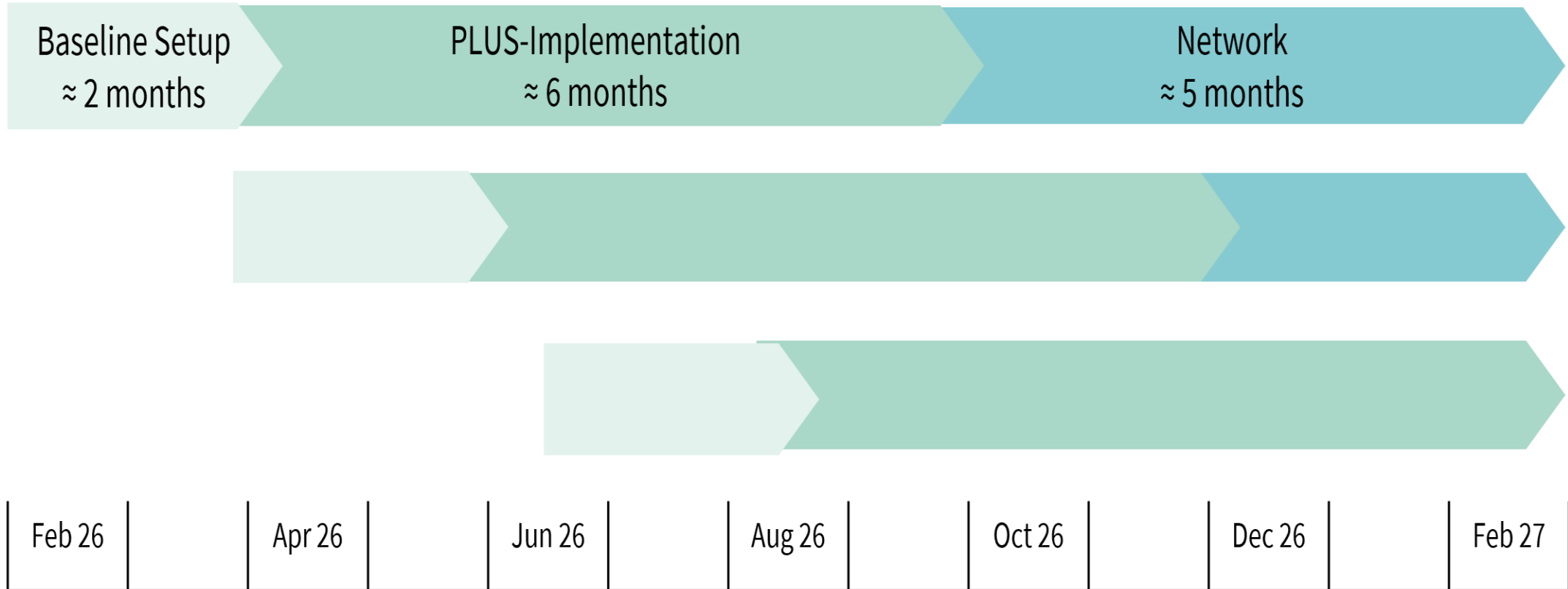
# External support provided through the PLUS study

Participating organisations are supported with:

- **Structured tools and materials**
  - Safety culture survey, reflection matrix, and basic training materials
- **Facilitated reflection and prioritization**
  - Externally facilitated maturity-level workshop
- **Guidance for translating reflection into action**
  - Support in priority setting and learning case development
- **Ongoing external support**
  - Monthly coordination meetings and ad-hoc support as needed

# Timeline

## Staggered start of participating organisations



# What are we evaluating – and why?

## **Feasibility**

*(assessed once at the end of implementation)*

- *Can PLUS be implemented in everyday practice?*
- *Is it perceived as useful by the participating organisations?*

## **Fidelity**

*(monitored through monthly coordination meetings)*

- *To what extent is PLUS delivered as intended across sites?*

## **Contextual enablers and barriers**

*(monitored through monthly coordination meetings)*

- *Which organisational conditions support implementation, and where do challenges arise across different healthcare settings?*

## **Early indications of impact**

*(follow-up survey)*

- *Do teams perceive initial shifts in safety culture change after the first PLUS cycle?*

