

Patient Safety and Medication Safety Culture in a Hospital Pharmacy Department: A Mixed Methods Study.

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BACKGROUND

- There is a huge global drive and an increasing priority placed on research into safety culture in healthcare.(1,2)
- Safety culture is defined as ‘the product of individual and group values, attitudes, perceptions, competencies and patterns of behaviour that determine the commitment to, and the style and proficiency of, an organisation’s health and safety management’.(3)
- One of the first steps in which healthcare organisations can aim to improve safety culture, is an assessment of the current safety culture.
- While patient safety culture surveys are a widely accepted measurement tool to measure patient safety culture, there is no widely used tool to measure attitudes towards medication safety. Measuring patient and medication safety culture could identify important areas for improvement.
- Pharmacists play an essential role in patient safety culture and medication safety, coordinating and implementing patient safety initiatives and preventing medication errors, however there is limited literature on safety culture in pharmacy departments specifically.

AIMS

Aim: To assess the perceptions, opinions and attitudes of pharmacy staff to the patient and medication safety culture in University Hospital Limerick (UHL).

METHODS

- A mixed-methods cross-sectional survey study was conducted in the pharmacy department of UHL over a two week period from June 14th to June 28th 2021.

Quantitative data:

- For the **patient safety culture assessment**, this study adopted the short form version of the Safety Attitudes Questionnaire (SAQ). The SAQ is a self-reported psychometric questionnaire developed to measure safety attitudes of front-line workers. It is a commonly used 32 item Likert-scaled questionnaire to measure patient safety culture. The SAQ is a validated tool to measure patient safety and it enables comparison to International Benchmark.
- For the **medication safety culture assessment** part of the questionnaire, 12 Likert-scaled questions were developed.
- Statistical analysis was performed on the quantitative data.

Qualitative data:

- Thematic analysis was performed on the qualitative data (Two open-ended questions on recommendations to improve patient and medication safety).

RESULTS

- 44 staff members completed the questionnaire (30 pharmacists and 14 pharmacy technicians) resulting in a 75.9% response rate.

Patient Safety Culture:

- The pharmacy department scored below the International Benchmark in four domains, with particularly low scores in the ‘Perceptions of Management’ and ‘Working Conditions’ domains. See Figure 1.

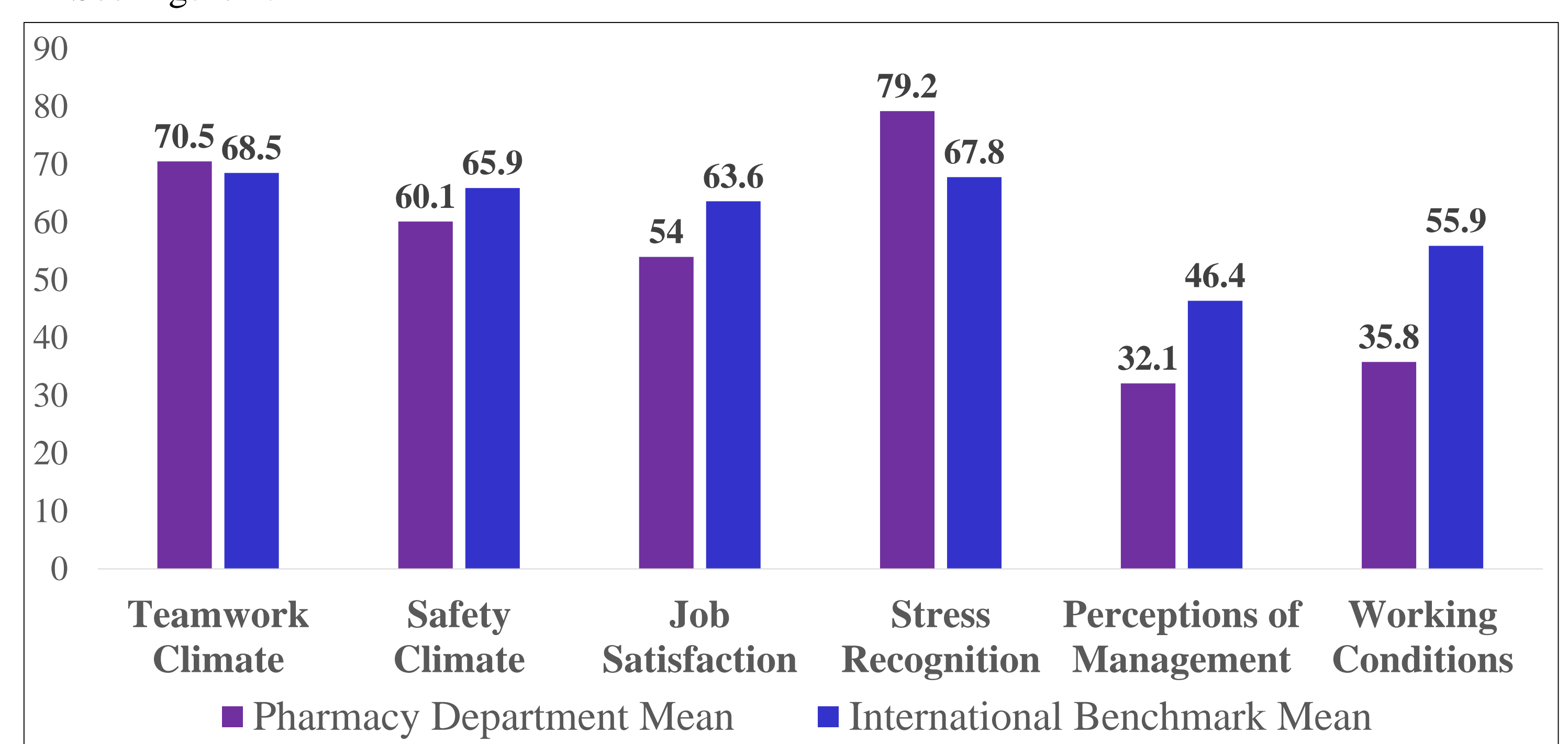


Figure 1: Comparison of patient safety culture mean scores from the pharmacy department and International Benchmark.

Medication Safety Culture:

- The medication safety culture domain was positive with a mean score of 61.8 from pharmacy staff. Pharmacy technicians had a more positive attitude with a mean score of 72.2 compared with a score of 57 from pharmacists.
- The question ‘I am encouraged by my colleagues to report any medication safety concerns I may have’, had the highest positive response rate of 93.1% from respondents.

Qualitative Data:

- 75% of respondents completed the open-ended questions and seven key themes emerged from the qualitative data. See Figure 2.

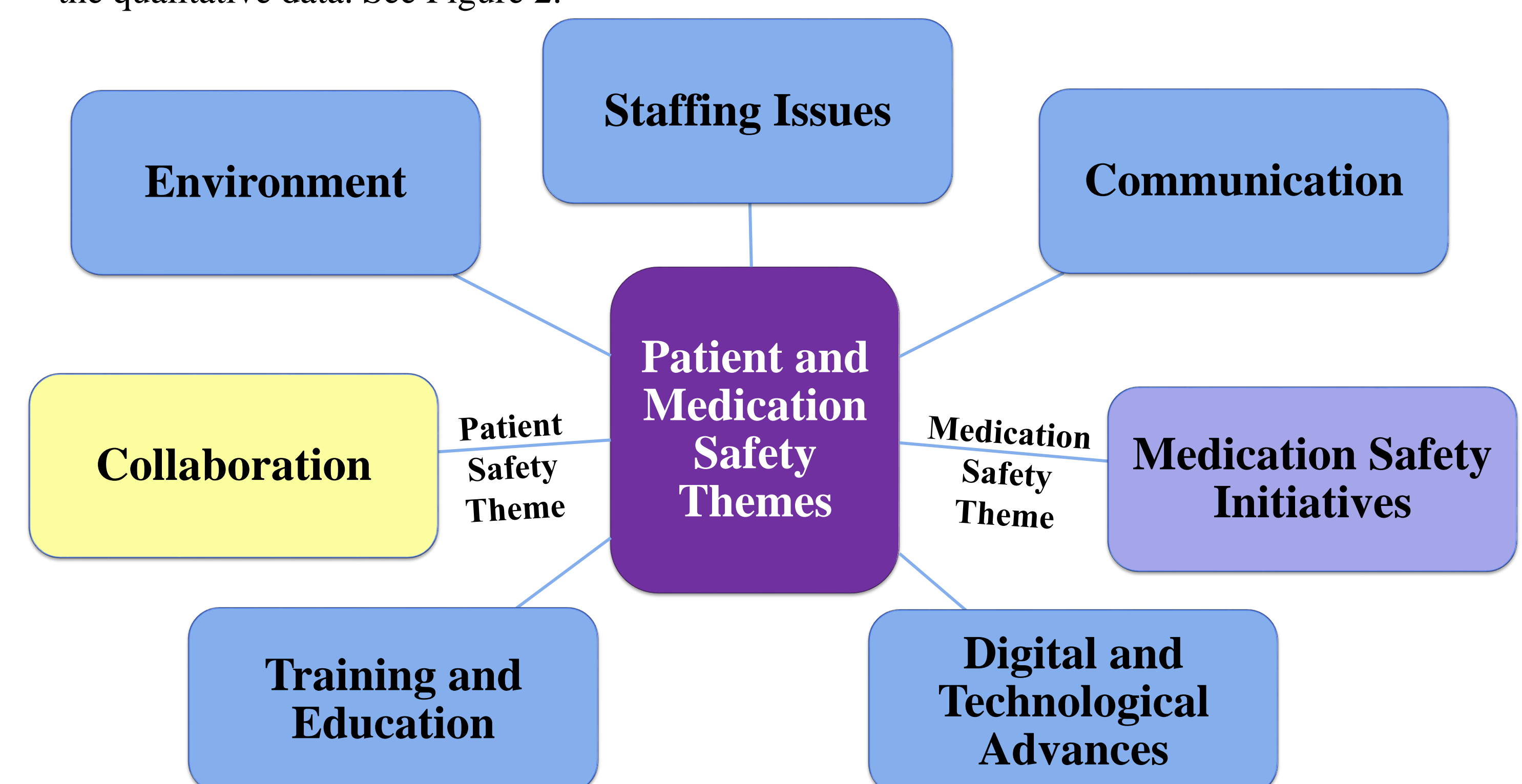


Figure 2: Patient and Medication Safety Themes.

CONCLUSIONS

- This study revealed that UHL’s pharmacy department had a positive medication safety culture. UHL scored below the International Benchmark in four domains for patient safety culture. Staff perceptions of safety may have been biased by exceptionally stressful working conditions during the COVID-19 pandemic and the Health Service Executive cyber-attack.
- Pharmacy staff identified many barriers to improving safety in the hospital such as staffing issues, communication, lack of training and education and work environment. Pharmacy staff recommend the use of more technological advances, collaboration with multidisciplinary teams and more medication safety initiatives. These are important recommendations that could be discussed with hospital management and introduced to improve the safety culture in the hospital.

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