

Medication Safety in Contemporary Healthcare Systems

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Abstract

This study employed a three-time cross-sectional investigation whereby data was gathered from staff members in retail pharmacies. Also, a qualitative content analysis technique aided in establishing themes about the participants' perceptions, as well as their suggestions regarding some of the improvement mechanisms that could be employed to yield better outcomes in the pharmacy industry. In the results, the study established that most of the pharmacists exhibited a positive attitude towards patient safety culture as a health care dimension. However, most of the participants held a less favorable attitude relative to the role of hospital managers as those supporting patient safety. Some of the improvement strategies that were suggested included the need for committed management, improved feedback, teamwork and collaboration, and increased staffing. The implication for the pharmacy industry is that all the personnel charged with pharmaceutical service provision ought to be charged with patient safety and that organizational fatigue needs to be addressed through actions such as teamwork and collaboration, as well as increased staffing.

Introduction

Whereas significant technological and skill advancements have been made in the health care industry, especially in the last few decades, injuries and sentinel events continue to be reported by patients and their families [1]. The trickle-down effect of these events entails increased length of hospital stay, as well as disabilities at the times of patient discharge [2]. These worrying trends have attracted attention towards the subject of patient safety; especially at a time when medication errors continue to be documented as one of the leading causes of deaths in developed and developing regions [3, 4]. Thus, all aspects of care have had to focus on how they could improve the safety of patients. Apart from increased healthcare costs, adverse events have been observed to stretch beyond increased lengths of stay in hospitals to cause psychological torture on the part of health care providers, patients, and their families or relatives [5-7]. Therefore, many organizations have acknowledged the criticality of event reporting as one of the avenues through which they could learn from errors and improve their service delivery processes [9]; hence patient safety. The eventuality is that the process of improving patient safety translates into the perceived trend of the culture of safety in health care [10-13]. In this study, the central purpose was to investigate the perception of the pharmaceutical sector's service providers toward the subject of a culture of safety. The motivation was to unearth the practitioners' and providers' knowledge about how accidents and threatens against patient safety occur, upon which improvement strategies, if any, could be recommended as deemed appropriate.

Methods

From the perspective of the research design, this study relied on an explorative and descriptive design in such a way that qualitative and quantitative data was collected, translating into a mixed methods technique. In relation to the study's participants, central Sweden was the target research setting and the study focused on a selected county council. With the participants

constituting pharmacists and service providers in the pharmaceutical sector, a cross-sectional web-survey was utilized. For the selected employees, a link was attached to their emails for filling in. Some of the information that was required included the participants' demographic characteristics, their perception about patient safety culture, and some of the strategies they perceived as or recommended to be significant or relevant and worth implementing to avoid sentinel or adverse events in the future. Imperative to note is that the decision to participate was voluntary and the participants were free to withdraw at any stage of participation, especially if they felt uncomfortable with the subject under investigation. Similarly, privacy and confidentiality were assured by securing the data obtained using strong passwords. Participant anonymity was also assured by avoiding to collect personal information such as their real names and the positions they held in their various firms. To obtain the email addresses of eligible participants, personnel officers and healthcare organization managers were consulted and requested to provide consent, with the identified participants also requested further to provide informed, written consent. Regarding data analysis, the information obtained was summarized in terms of percentages and frequencies, as well as standard deviation and the mean. It is also notable that the case of qualitative data saw a qualitative content analysis technique employed. Particularly, the focus of this approach was on the participants' written comments, upon which the emerging themes were established; with particular emphasis on the pharmacists' suggestions about some of the improvement strategies that could be embraced to promote the patient safety culture.

Results

Regarding the perception of pharmacists towards the patient culture safety, this study found that the majority of the participants held a more favorable attitude towards patient safety attributes that would deal with the work in their units. Specific and unit-level aspects that depicted this trend in the selected population included feedback and communication, communication openness, and teamwork within pharmacy units. On the other hand, dimensions where the participants held a less favorable attitude in relation to the aspect of patient safety included information to relatives or patients and hospital management support. An area that was found to be in need of improvement entailed the frequency of event reporting.

Indeed, 58.90% of the pharmacists held a positive attitude towards their work's overall safety. Out of these participants, those who rated the safety as very good were 53.00% while those who rated it as being excellent were 5.90%. It is also notable that most of the participants had written and reported one or more events in the previous year. The latter group constituted 67.10% of the participants. Specifically, those who had reported patient safety-related events ranging from 3-5 events were 19.50% while those who had reported a number of events ranging between 1 and 2 were 40.90%.

Another aspect that was investigated involved the participants' suggested improvement strategies through which the perceived patient safety culture might be realized. From the application of a qualitative content analysis approach, nine categories emerged. In particular, the pharmacists advocated for various approaches, which were summarized as follows:

Increased staffing	Hard and soft resources	Look beyond finances	Clarity and follow procedures	Right patient at the right place	Teamwork and collaboration	Improved feedback	Systematic event processing	Committed management
X	X	X	X	X	X	X	X	X
X	X	X	X	X	X		X	X
X		X	X	X	X	X	X	X
X	X	X	X		X	X		X

From the table above, many participants advocated for the need to increase staffing. In so doing, heavy workload could be avoided – a trend that was predicted to shun possible adverse events accruing from high workload among pharmacists. Another strategy entailed the need to increase soft and hard resources in pharmacies. Specifically, it was established that soft resources include the provision of appropriately planned pharmacy schedules while hard resources were suggested in terms of facilitation to ensure that adverse events arising from resource inadequacy or constraint are avoided. It was also suggested that pharmacy managers and owners ought to look beyond finances and ensure that they do not overemphasize cost savings at the expense of patient safety. Similarly, it was suggested that procedures ought to be clarified and followed; including issues such as follow-ups, tests, the use of checklists, and patient education. Other suggestions included the need for teamwork and collaboration, ensuring that the right patient is at the right place to avoid medication errors, improving feedback provision, and processing events in a systematic way that shuns potential occurrences of adverse events.

Conclusion

In conclusion, the central purpose was to investigate the perception of the pharmaceutical sector’s service providers toward the subject of a culture of safety. Results demonstrated that improving patient safety is the responsibility of all the personnel charged with pharmacy services. In situations, where the participants held a more positive attitude towards the support of the upper manager relative to patient safety, they (the participants or pharmacists) were also likely to hold a more positive attitude toward the subject of patient safety culture. Some of the recommended strategies to improve patient safety included teamwork and collaboration, learning from mistakes, the provision of regular feedback, open communication, and the development of a supportive and committed management in pharmacies. In future, there is a need for scholarly investigations to focus on how patients perceive the safety culture in relation to the quality of care received.

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