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The Impact of Patient Safety on Healthcare Delivery

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The Impact of Patient Safety on Healthcare Delivery

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Abstract

This paper goes into focus on the different types of patient safety. I am writing this paper to give viewers a better understanding of the safety and concerns that do appear when a patient is in our care. Patient safety is a training that emphasizes safety in a healthcare setting through reporting, prevention, and reduction, as well as analysis of the medical error that does lead to different adverse effects. The main concern and focus is how we as healthcare workers can make new approaches, as well as trying to limit the amount of errors with paper training.

The concerns on patient safety is a big concern in our world. Throughout the paper I will be discussing the different concerns and how we can better the safety and care of others. In the paper I will be making a list of the top concerns and add a brief description towards the end to explain how we could do a better job as healthcare workers and providers. As the paper continues I will go to explain certain situations could be handled in the best manner. I will go to explain the key word which patient safety is, so the viewers can get a better idea on how it is easy to make an error in safety of a patient whether it being locking a patient bed, going into the wrong room, or prescribing different medications to the wrong patient when in a possible rush (which is dangerous and should never happen).

The goal of this paper is for readers to get better understandings and to watch closely when handling patients. Medical errors happen daily, and it could be easily missed, especially when multiple things are going on at once with the patient. Upping
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better training for health employees could help the patient errors decrease to better not only the patients but ourselves as well on knowing how we as healthcare providers can limit errors for a healthier and happy patient.
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Patient safety is a training that emphasizes safety in a healthcare setting through reporting, prevention, and reduction as well as an analysis of the medical error that does lead to different adverse effects.

Patient safety is one of the up most important focuses in healthcare today. It takes more than just one person, but a group of healthcare workers to better the healthcare community. As time goes on, managing the care for not only the patients, but the staff as well will continue to improve.

**Patient safety guidelines**

- Identify patients correctly
- Communications improving more effectively
- Practicing safety on high-alert medications
- Making sure surgery is safe
- Risk of health care-associated infections being reduced
- Risk of patient harm resulting in falls reducing

Increasing the experience by patients and delivering proper centered care has become a priority for every hospital today. Hospitals tend to send out surveys to better
their better publicity towards patients, but the road ahead has more improvement that needs to be made. Some of the top practices all over in patient centered care have researched and dispersed this project to focus on promising practices of all United States hospitals that place deliveries towards patients at a top priority to make great outcomes in the area.

Top delivered patient care

- Standards of performance: making sure all health employees follow through on mission statements and how to respond to certain concerns by patients.
- Care boards: updated information on a dry erase board in patient room so each healthcare worker is aware of changes.
- Hourly rounds: health care providers checking on patients every hour to make sure patients are comfortable, no pain, and every item is in reach when needed.
- Shift reports at bedside: nurses let other healthcare providers that are coming in for their shift aware of any updated information, and to check if patients have any other questions.
- Discharge papers: patients receive papers on proper medications, appointments, and care on how to be aware of how to be safe when home.

The creation of standards of performance in patient safety serves as an importance for multiple purposes. Setting expectations for health care organizations can help develop great levels of performance by our health care workers. It is important that health
employees follow through with the mission statement at their place of work, so patients understand what we are about and how we care for our patients. If patients have concerns or questions, it’s the healthcare employees’ responsibility to make sure they are taken care of in the best way possible.

Hourly rounds are top priorities when in a healthcare environment for updating information, checking patient’s stats, and their health at the time. Hourly rounding addresses the needs of the hospitalized patients, so they are comfortable away from home.

Improvements documented by researchers who collected data from hospitals:

- 52% reduction in patient falls
- 37% reduction in patient use of call bells/light
- 14% decline skin breakdowns and pressure ulcers
- 12% increase patient satisfaction ratings

Normally in a hospital it is not just the doctors that make the rounds, but the nurses and certified nursing assistants. It is important to make rounds every hour during days and every 2 hours overnight, so we meet the needs of patients at those times.

4 P’s

- Pain “how’s your pain”
- Position “comfortable?”
- Potty “bathroom needs”
- Possessions

This approach helps to improve detection of the deteriorating patient, improves satisfaction of patient, reduces rates of falls, prevents pressure ulcers, helps decrease medication errors and call light usage. The 4 P’s helps a patient to feel more comfortable in the hospital setting they are. When staying in a hospital, a patient is no in their own how, so it is up to us as the healthcare workers to make them feel as if they are home and safe. We must think “how would we dell if it were us in their shoes.” If we can put ourselves in their position, it would help us to understand how they truly feel.

Communication with the patient and family about all areas of care, treatments, and services is an important characteristic of a culture of safety (Bedside shift reports can save lives). Bedside shifts have been around for years, but the safety and importance continue to grow as years go on. Once a nurse switches shifts, they report to the new nurse on the shift to make them aware of how the patient is feeling, what medications they have taken if needed, their improvement, and vital signs. Bedside shifts are important and they help the doctors to be aware of how well their patient is improving. Communication is a big part of the healthcare field because it keeps the patient safe and for healthcare workers to understand the condition of the patients.

When being dismissed from a stay at the hospital, nurses and doctors tend to send a packet home with the patient. This form is mandatory to be filled out by the medical specialist or physician that treated the patient whose hospital stay was longer than 48 hours. These forms are called “discharge papers” or “hospital discharge summary”. Discharge forms show that the patient visited the hospital and received care as well.
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Discharge from a hospital or any medical organization is when a patient can either be sent home from feeling well or being sent to another facility depending on the health situation. Discharge papers normally involve medical instructions for the patient to help them fully recover. Planning in discharge settings helps to consider the patients’ needs after a hospital stay and it could even involve different services that could be included such as home blood drawing, physical therapy, and nursing care.

Discharge instructions that should be included

- Explanation of care the patient received
- List of medications the patient needs to take a certain dosage, frequency and times
- Possible side effects of prescribed medications
- Follow-up appointment
- Signs of infection or possible worsening
- Explanation of services the patient could be receiving and contact information for any possible visits

While giving a patient their instructions, it is important to make sure they are given the proper medication scripts, instructions, and care before they leave. It is our responsibility as the healthcare employees that all questions are answered properly and that the patient is in good shape before they leave. Discharge instructions are important in-patient safety because patients need to understand the importance of their proper care and how they are taking care of themselves.
Prevention of infection

Standard precautions were made to help lower the risk of transmission of bloodborne and other specific sources.

10 Best Strategies

1.   hand hygiene
2.   screening of patients
3.   environmental hygiene
4.   vaccinations
5.   surveillance
6.   care coordination
7.   antibiotic stewardship
8.   evidence
9.   supporting all departments that support infection prevention program
10.  comprehensive safety program

Hand hygiene is known as handwashing which is clearing hands of any soil, dirt, and other microorganisms. Typically, is soap and water being not available there are other ways such as a sanitizer or ash. The importance of hand hygiene is to help avert and control the spread of many illnesses that are in a medical environment. Typical good hand hygiene helps to reduce the risks of catching certain things such as food poisoning,
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healthcare associated infections passed along, and the risk of catching the flu. Its important to keep hands washed after bathroom breaks and keeping them cleaned going in and out of different patients’ rooms. Averting the spread of germs in a hospital is especially important because it prevents risks of getting infection while providers are treating their patients.

Screening patients can help reduce the risk of depression or other serious issues when a patient is at an appointment or overnight stay. Suicide risk is what healthcare providers try to notice and help patients with, so they can make the patient feel comfortable, important, and safe. Screening patients is a major intervention to limits possible concerns with patients. There are different types of screening between a person such as cancer screenings, mammograms, or severe illnesses.

Environmental hygiene is a powerful cleaning of products, surfaces, sanitizing medical equipment and devices that are used in certain patient care procedures. Environmental hygiene is important in a healthcare environment because it helps to put a stop on the transmission of diseases in the setting. Cleaning the environment in the healthcare helps to reduce the amount of infections agents that could be present and could help to decrease a risk of transfer of microorganisms from an object to a person.

A vaccination is a treatment that helps to create immunity against certain diseases. Working in a jail or any healthcare organization, as an employee it is important to keep with yearly vaccinations to help keep diseases away when dealing with patients. Healthcare workers are at high risk for exposure to severe and deadly diseases. As a healthcare worker it is our right to deny care depending on our culture views but if
culture views no play a major role, then as a worker it is mandatory an employee does have their vaccinations.

Surveillance is a good safety precaution to have not just in healthcare but in other organizations as well. It is a close examination of any possible attempts to hurt a person or other objects. Surveillance has been pointed out to be an important strategy in putting a stop to medical errors and in harmful events. When dealing with surveillance, it is monitoring such events to evaluate the best possible practices in patient safety.

Care coordination involves organizing activities in patient care and spreading information among many that are focused in attaining safer and more successful care in patients.

**Broad care coordination approaches**

- teamwork
- care management
- medication management
- health information technology (HIT)
- patient centered medical home

**Specific care coordination**

- establishing and agreeing on responsibility
- communicating/ spreading knowledge
- volunteering on transitions of care
- helping with patients’ needs and goals
- creating care plans
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- monitoring changes in patients’ needs
- community changes

The focus of care coordination is to focus on the patients' needs and liking in the delivery of high quality, and high value in healthcare.

Care elements of antibiotic stewardship

*Leadership commitment*- involving information technology, resources, and financial resources as well

*Drug expertise*- working to improve use of antibiotics by having one specific person focusing on the better

*Tracking*- watching over the amount of prescribing and certain patterns

*Reporting*- keeping updates on antibiotic can help reduce over prescribing

*Accountability*- program outcomes becoming successful to show that things are effective

*Action*- evaluations being needed after a certain amount of time antibiotics have been used

Antibiotics have helped to improve how the practice of medicine has been used. As time goes on, medical advances have been improved to help certain diseases that are
considered “untreatable”. The focus on antibiotics is to treat infections and to evaluate to see if it has been proven to lower risks and save lives.

It is important to promote change in a healthcare organization because it can help to improve and reduce medical errors. Evidence based teamwork can help to better the environment because it can help improve teamwork performances and communication.

Healthcare associated infections (HAI) are infections that occur during or because of the provision of healthcare (Health associated infection prevention plan). The nature of control, and prevention of infection if constantly changing and the responsibilities of the healthcare workers are increasing. Reducing the rates of infection is what the healthcare environment needs. Infection control workers have been expected to watch over rates of infection and the providers behaviors to help lead, execute, and to intercede any other healthcare providers to help reduce infection rates.

1. Comprehensive safety program management of commitment and employee involvement
   - Management and employee commitment form the main part of the health and safety program. Employee health and safety are fundamental values of a healthcare organization and it pertains to the safety and health protection for management and current employees.

2. Worksite analysis
   - Worksite examinations help to identify certain current hazards and conditions that could change and create new hazards.

3. Hazard prevention and control
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- As a workplace it's important to prevent hazards and other exposures due to job sites that could be a possible danger to workers and patients.

4. Safety and health training
   - Training is an important role in a health program. Going through training can help to focus on the safety and health responsibilities when it comes to management and all employees. Training can help focus on main concerns in healthcare and to help prevent patient errors.

10 Best practices for Patient Safety

1. Curb infection spread: before walking in to and out of a patient’s room as a healthcare worker, this can help to reduce the spread of any infectious diseases.

2. Identifying patients: name and date of birth are the top two pieces of information when identifying a patient. It is important to identify the patient before giving any medications, vaccines, or procedures.

3. Medicines being used safely: all drugs should be labeled in any healthcare environment. When a patient is on any medication, the commission goes through to make sure medications are not being mixed in the wrong way.

4. Avoid surgical errors: before taking, or even scheduling a procedure, patients should always be identified.
5. Preventing venous thromboembolism (VTE): VTE is the most known cause of preventable hospital deaths. Patients should be provided the appropriate care by all healthcare workers (physicians, nurses, PCAs, HUC, etc.).

6. Hospital discharges: hospital discharges should be an easy follow plan when explaining care to a patient, so they will understand. Discharge instructions include medications and when they need to be taken, upcoming medical visits, names and numbers to call if problems tend to arise.

7. Hospital principles: in hospital designs, when a patient has been admitted, hospital rooms should be designed properly to help prevent possible falls and other harms that could occur and harm the patient.

8. Great teamwork and rapid response: build up confidence for everyone that is included in the medical team and advise each team player to speak up and communicate to get better responses to certain emergencies in the hospital.

9. Data sharing for improvement in quality: sharing data is the collection of different data that is combined from different areas to help try to reduce falls, pressure ulcers from laying on their side for an outcome.

10. Open communication culture: communication is key, especially in the healthcare environment. Healthcare workers need to maintain their awareness in certain clinical situations. By bettering training on communication, it can help reduce human related incidents.

Prevention of infection
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Infection prevention and control practices are important maintaining a safe environment for patients by reducing the risk of the potential spread of disease from person to person (Infection Prevention and Control-Halton Healthcare). With these practices, they are made to help lower risks at hospitals for infections that normally linger in a hospital environment.

How to prevent infections

1. Hand hygiene
   Good hand hygiene is when one is cleaning hands with soap and water after the restroom, before entering the patients room and after. Good hand hygiene can help reduce infections from being spread.

2. Cover cough
   Respiratory infections such as common cold, and flu are easily triggered, especially in the hospital environment. Respiratory infections spread easily and luckily, they can be treated very quickly, but it is still important when coughing, instead of covering your mouth with one’s hands always cough into arm that way germs are not being spread.

3. Isolation precautions
   When working in the medical environment, there will be times where patients have been identified as having an airborne infection, which requires isolation precautions for staff. Certain instructions must be followed before entering a
patient’s room. There are certain signs that are always posted outside of the patient’s door that begin with “All persons entering the room”.

Transfusion- transmissible infection

Blood transfusions have been led to be known as the main source of disease transmission to patients

Viral infections that can be transmitted

- Parvovirus B19
- Cytomegalovirus (CMV)
- Human immunodeficiency virus (HIV)
- Hepatitis virus
- Human t-cell lymphotropic virus

Today, the high risk of transfusion-transmitted infections has been lowered, but blood borne bacteria and parasite infections are an increasing concern in the healthcare community. To help reduce the high risk of infections patients that are giving blood should be screened before another patient receives the transfusion.

Hygiene in healthcare
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- *Environmental hygiene:* major important role in healthcare because the hygiene can help prevent infectious diseases within the healthcare environment setting.

- *Environmental surface cleaning:* helps to lower the amount of infectious disease that could possibly be present along surfaces and every other area. Disinfecting/cleaning helps to physically remove foreign bodies from surfaces through uses of detergent, friction, and water.

- *Cleaning standards:* used patient equipment must be handled in a way that helps to prevent mucous membrane, and skin exposure, as well as the contamination of clothing and shoes. When working in any medical environment it is important to sanitize every accessory.

### Monitoring patient errors

Healthcare is not as safe as many thinks that it should be. There are three main strategies that should be accomplished to help improve patient safety:

1. Safety management
2. Learning from past errors
3. Fair exchange of information through health environment

### Errors and failures
Patient safety is the nonexistence of harm that could be prevented to a patient during the method of the healthcare and the decrease of risk to unnecessary harm that is like healthcare.

Findings from the Harvard medical practice study found that more than 70% of errors resulting in adverse events were secondary to negligence, and more than 90% were judged to be preventable (Wolf). It is easy to make errors in any healthcare setting whether one believes it or not. Errors such as forgetting to lock beds, or wheelchairs, and at times going into the wrong patient’s room depending on how busy a provider is.

**Medication Errors**

- Similar names/ packaging on medications
- Medications prescribed regularly
- Patients that have allergies reactions to certain medications
- Tested medications that are nontoxic and can be preserved

**Prevention of medical errors**

- Better communication between healthcare workers
- Pharmacists should be more involved with medical doctors to better understand the medications so there can be no more errors in medications
- Follow guidelines on hygiene/ cleanliness
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- Involve entire healthcare team when diagnosing a patient to communicate and better understand the diagnosis
- Allowing electronic health records to improve better communication between healthcare professionals to discuss patient treatment, history, diagnosis, etc.

Patient technology and safety

The focus and goal on patient technology is to help improve communication between providers, better medication safety with patients, tracking, reporting, and helping to better the quality of care through technical access through guidelines. The best way to help improve patient safety, medication alerts, tracking, reporting consults, and complete patient data, could possibly be to constantly keep patient information updated on technology. Today, there are programs online called “MyChart,” which allows patients to log on and it gives patients access to all health information, medication, appointments, and test results. MyChart has been a game changer for healthcare because it helps patients and provides better understanding on the patients’ health status.

Evolution of Healthcare

1960s: Medicare and Medicaid main insurance providers. Computers and storage had been so big and pricey that hospitals had to share mainframes in other buildings.
1970s: Computers became small enough to be installed in one single department without environment controls. Communications between departments were needing to be handled.

1980s: For the first, hospitals needed to pull significant information from both clinical and financial systems to be reimbursed (Ranard, 2015).

1990s: Hospitals came together as one, including providers and managed care.

2000s: technology and bedside clinical applications improved.

**Nurses using their sense of sight, touch, smell, and hearing**

- Hearing: Stethoscopes are what providers use to hear heartbeats. Providers listen to cardiac rhythms, bowel sounds, and sounds of breathing.
- Touch: Can be used for means of diagnosis, can help for empathy, comfort, and relief for patients.
- Smell: Nurses at times could diagnose simple UTIs on a certain smell of a patient’s urine.
- Sight: As a health employee, there are certain things to look for. Is the patient breathing? Signs of deterioration, CT scans, X-rays, MRIs, and soon.
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Nurses becoming better trained

In the early days of nursing, women learned medical skills from their mothers or other women in the same profession (“How Nursing has changed over time,” 2015). Women did not fully have rights then and women had been known as the care takers such as cooking, health/ injuries, cleaning and taking care of the children. Today, both men and women are nursing and taking care of patients equally. Medical areas that have come about for nurses in hospitals, physician’s offices, assisted living facilities, and home health care. Technology has advanced and has been safer for patients in healthcare environments.

Avoidable prescription errors

Types of medication errors:

1. Prescription errors
2. Dispensing errors
3. Administration

Prescription errors are most well-known causes of unfortunate events, prescription errors can be dangerous when in the hands of the wrong patients. Errors in prescribing can be divided into irrational prescribing, inappropriate prescribing, and ineffective
prescribing, under prescribing, overprescribing, and errors in writing the prescription (Rehan, 2015).

Dispensing errors are medications that can cause an error in supplying the wrong medicine, strengths of medications, inaccurate directions, quantity incorrect, and drug usage. Simple errors such as these can be avoided if providers are providing accurate medication to the right patients and proper safety rules.

Administration errors are through healthcare providers such as the doctors, nurses, etc. It’s their responsibility when it comes to the medication errors. Wrong dosage can occur when a physician has had a possible busy day and misreads the wrong prescription from another patients file, or through poor communication. Medication errors can be dangerous when in the hands of a patient, especially if it is the wrong patient. Dangers such as death can occur if given to the wrong patient with a severe illness, injury, or allergy.

Adverse events are injuries that result from a medical intervention and are responsible for harm to the patient such as death, life-threatening illness, disability at the time of the discharge, or prolongation of the hospital stay (Garrouste-Orgeas, et al). Patients that are in severe danger typically are those who are in critical care such as ICU, or hospice at times. Its important as healthcare workers to help protect these patients from any possible danger when in the health environments.

Communication errors are a top priority in healthcare. When in comes to any medical or non-medical areas, communication is key as it can cause severe harm to the patient and just a person in general. Communication errors are a leading cause of mistakes in the medical environment.
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Top 3 diagnosis errors in healthcare

1. Poor communication between primary and secondary care
2. Inverse care law: patients that most likely need to be seen do to major problems are never seen whereas patients who are not in the worst of shape tend to be seen quicker.
3. Patients that are attending other medical services as walk-in clinics instead of seeing their original physician at the doctor’s office

Major solutions that identified

• Better accurate system that can help better communicate abnormal results for patients
• Hotlines to medical providers that can speak with patients on their medical problems
• Guidelines for not only cancerous diseases but other medical conditions as well
• Affordable updates
• Catching on to warning signs, serious medical conditions
• Preventing delayed diagnosis

Improving medication errors
A fundamental step to improving medication safety is for physicians and other healthcare providers to be familiar with the medications that are available to treat their patients (“Women’s Health Care Physicians”).

- Keep references on up-to-date medications, and keep them while the drug is being prescribed to patient
- Recognize condition and diagnosis of the patient
- Watch the status quo that could affect dosage, medication, where medication is coming from, weight, and patient’s characteristics
- Understand previous medications that the patient is currently on and will be prescribed in the nearby future
- Remember that there is a high risk on the patient and drugs that can cause harm to the patient, such as dosage and the time that the medication was taken and who gave the patient the medication
- Keeping up to date that patient’s previous medication is still being taken as prescribed and that there are no issues with medications
- Making sure that there are certain changes for the patient that the medication is still agreed upon taking as prescribed my physicians orders
- Educate patients on the proper way to handle medications and the potential risk of overdoing medications
Adverse drug events becoming a major problem for Patient Safety

Figure 1

Relationship between adverse drug events (ADEs), potential ADEs, and medication errors.
Educating staff on patient safety

Training and education are critical to the success of any safe patient handling program, especially training on proper patient handling equipment use and ongoing education about the benefits of safe patient handling (“United States Department of Labor”).

Patient safety training/education

- Keeping all employees trained on all medical equipment
- Keep ongoing training monthly to keep minds refreshed on handling patients and equipment
- Mentors
- Educating caregivers on how to operate on equipment when involved with patients
- Educate family members and patients

Patient safety tools to support change
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- Design and implementation
- Approaches on patient safety
- Home health care
- Care team checklist
- Experience
- Improving education in hospital
- Prevention and control
- Liability

Educating and training- worker safety in hospitals

When it comes to working in any health care environment, it can be dangerous. Protecting workers is very important, as they handle needles and patients daily. Working in a health care environment is more dangerous than working in any other setting such as construction. Handling equipment such as slings and lifts, if not properly handled can cause harm to a worker depending on sizes of a patient and the proper ways it's being handled. When an employee gets hurt on the job, hospitals pay the price in many ways, including: Workers compensation for lost wages and medical costs; temporary staffing, backfilling, and overtime with injured employees miss work; turnover costs when an injured employee quits; and decreased productivity and morale as employees become physically and emotionally fatigued (“United States Department of Labor”).
Training and education critical to the success of patient safety

- Prevention of blood stream infections
- Better understanding on discharge instructions to patients
- Prevention of venous thromboembolism (VTE)
- Education to patients on properly using blood thinners
- Respecting patients culture views
- Good staffed teams

Engaging patients and their families

- Better communication amongst families and the patient
- Safe communication to families and patients through bed side shift changes on health care employees
- Proper discharge instructions to families and patients to better understand the safety of the patient when they’re home alone

Train caregivers to check patient’s mobility every time

1. In the bedroom:
   - In and out of bed
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- Turning over
- Sitting patient up

2. Bathroom:
   - Showering
   - Washing
   - Using restroom

3. Out of home
   - Sitting
   - Walking/standing
   - Helping up from the floor if patient falls
   - In and out of vehicle

Before moving a patient:

- Do they need help moving?
- Does the patient need help or any supervision?
- Communicating with patient on any movement when handling the patient
- Weight of patient
- Are you able to help a patient depending on your condition?
- Enough space to move patient to safe area
- Are your feet stable?
- Is your back straight before moving patient?
Examples of poor patient safety practices

- Health infections
- Complications in surgery
- Poor communication
- Wrong diagnosis
- Not respecting patient culture views
- Giving patient incorrect medications
- Not having equipment properly locked when handling a patient

Healthcare-associated infections

Healthcare-associated infections (HAIs) are infections that people get while they are receiving health care for another condition (“Overview”).

Possible risks of healthcare-associated infections:

- Catheters
- Injections
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- Surgeries
- Health care environments that are not cleaned

Surgical complications

- Wound infection
- Shock
- Hemorrhage
- Lung complications
- Reaction to anesthesia
  - Allergic reactions
  - Vomiting
- Urinary retention
- Deep vein thrombosis (DVT)

Handoff communications

A hand-off is a transfer and acceptance of patient care responsibility achieved through effective communication (Collins).

Diagnosis
A diagnosis begins when the patient is presented to a doctor with a set of symptoms or perceived abnormalities such as pain, nausea, fever, or untoward feeling (, &), "Diagnosis - Patient Information, The Physical Examination, The Laboratory Examination").

**Medication errors**
Number of Self-Reported Medication Errors. (n.d.). Retrieved from
http://www.ihi.org/resources/Pages/Measures/NumberofSelfReportedMedicationErrors.aspx

Failure to implement a culture of safety

1. Attitude
- No trust
- Continuous change
- Fear
- No worker involvement with patient

2. Responsibilities
- No commitment to patients
- No involvement
- Resisting communication with patients

3. Training
- No proper training

4. Groundwork
- No support from healthcare team members
- Failure to communicate
- No time for change

**Lack of interoperability**

Interoperability is the advantage of technology and different applications that communicate, help get information exchanged to other areas, and can help exchange data that is shared through hospitals, pharmacies, labs, and clinicians through the healthcare environment.
### Three levels of health information technology

<table>
<thead>
<tr>
<th>Foundational Interoperability</th>
</tr>
</thead>
</table>
| • Basic level of interoperability  
• Data from one information technology system can be received by another  
• The receiving system does not need to be able to interpret it. |

<table>
<thead>
<tr>
<th>Structural Interoperability</th>
</tr>
</thead>
</table>
| • Intermediate level of interoperability  
• Data exchanges between information technology systems can be interpreted at the data field level  
• Clinical or operational purpose and meaning of the data is preserved. |

<table>
<thead>
<tr>
<th>Semantic Interoperability</th>
</tr>
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</table>
| • Highest level of interoperability  
• Two or more systems can exchange information  
• Exchanged information can be used  
• Electronic exchange of patient summary information among caregivers and other authorized parties via potentially disparate electronic health record (EHR) systems |

("The Challenge of Interoperability")

Falls and other geriatric considerations
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Risk Factors for Falls

- previous falls
- decreased strength
- gait/balance impairments
- use of psychoactive medications
- visual impairment
- polypharmacy
- depression
- dizziness
- orthostasis
- functional limitations
- age > 80 years
- female sex
- low body mass index
- urinary incontinence
- cognitive impairment
- arthritis
- diabetes
- undertreated pain

*Risk factors in bold indicate strongest independent risk factor.*


Better treatment choices
Decision making

When it comes to making better treatment choices as a patient, it can be a difficult choice. Making these types of decisions, there are never any right or wrong decisions. A patient deciding on where they choose to have surgery to cure a disease/illness or not, that is up to the patient and on how they want to live their lives. It is up to us as health care providers to provide the proper care and treatment based on the patient’s decisions and needs.

Decision aids in the making

Better educating patients on how to handle certain situations can help patients to better understand how to properly care for themselves to prevent possible surgeries depending on how the patient feels and if they are in major pain or not.

Shared decision making

Without the support of certain medical centers, depends on the experience. Leaders in health groups are major decision based when involving large process of reviews of health care.

Culture change

Promoting safe care in the healthcare systems and respecting the culture is very important when it comes to the patients. Different training and open conversations are important when in the training world for healthcare if a patient’s culture is completely different from another. Because a patient believes in other things, it is up to us as
healthcare workers to respect their culture views to make the patient feel as comfortable as possible.

**Alarm Fatigue**

1. **Clean/Monitor Equipment**
   
   Clean equipment is important to have in a healthcare environment as it can pass certain disease or infections from patient to patient if properly not sanitized. Monitoring equipment is important as well as it helps to identify on how the patient is doing and if the monitors are working properly for the safety of the patient.

2. **Cutting back number of alarms**
   
   Alarms can go off at times even when a patient is not in harm, or the alarm is not functioning properly. A way to cut back on working alarms is to help drop noise levels and to make sure all equipment is working properly.

3. **Alerting to the correct people**
   
   In a hospital, when needing to reach a medical professional it can be extremely difficult to reach a person as on hospital phones, many people get routed to the wrong person and area in the hospital. If there is an emergency on the floor, it is important to be able to reach the healthcare professional right away as it could be a possible danger to a patient. Routing an important phone call to a healthcare professional should be simple as smart phones have become more advanced as the years have continued. Routing an important call should be simple and easy and it is something that should be considered in all
healthcare environments. It can be confusing being routed to the wrong healthcare provider as many in the hospital do now know different numbers to reach professionals. Faster responding can help patient satisfaction and can also make is easier on the healthcare workers as well.

4. Alerting at the triage

When there is a medical emergency a triage nurse is the one that typically receives the message before sending it to another healthcare professional. To make it simpler for the triage nurse, alerts should be received based on the immediate attention the patient needs to get the proper care.

5. Alerting fatigue in a hospital

Working in a hospital, the constant dinging of medical equipment and call lights can dim out important calls when it comes to the patient’s safety. To better help healthcare workers, it’s important to find an easier solution on when medical devices are going off for medical emergencies on the patients, so they can better help the patient.

6. Device alerts for patients

Depending on a patient’s condition and how they are feeling when in a health care setting, there should be certain buttons a patient should be able to push to help a nurse better understand what they are expecting when going into a patient’s room, and to also make sure they are walking into a patient’s room with the proper medical equipment instead of wasting moments of walking back out of the room.

7. Advanced learning in clinical department
The Impact of Patient Safety on Healthcare Delivery

Advancement in the clinical department can help create better productivity in workers safety and comfort for not only the staff members but for the patients as well.

8. Preventing false alarms

Taking steps to decide on which alarms are necessary and are not when working in a hospital. Many alarms in the hospital randomly go off due to monitors not completely fixed all the way, or a patient “accidentally” pressing the wrong button.

Meeting joint commission standards on patient safety

- Excitement in work
- Quality
- Mental health and well being
- Patient safety
- Leadership

Patient safety research

- Prevent patient falls
- Patient calls response being quicker
- Better on answering patient safety calls
- Good code teams
- Team members on quick call for better patient safety
Four steps to helping patient safety

1. Committees to evaluate processes

   Committees can come into a healthcare environment and evaluate certain procedures when it comes to patient safety. Reporting procedures can help to better not only patient safety but the staff safety as well. Every member in the healthcare environment deserves to include them in so that everyone can come together to better understand on how patient safety truly is.

2. Spreading healthcare news

   Getting to word out on how medical staff handle their patients with the proper care and treatment can be reached out to many patients for them to understand that coming into a certain hospital, you will be provided with the best possible care to make a patient feel comfortable. Spreading the word can help show many on how well trained and prepared healthcare workers are when in a serious medical emergency.

3. Results being evaluated

   Staff training can better prepare medical employees to better understand how to handle a situation at the right time to keep a patient safe and alive. A strong healthcare facility can keep all staff better prepared. It is so important to keep staff up to date on their CPR and other proper medical training needed when working in a healthcare environment.

4. Identifying safety problems
The Impact of Patient Safety on Healthcare Delivery

The most important problem to focus on is a strong healthcare community that can notice a severe medical emergency when in sight. Staff training can help medical employees to identify when something is wrong with a patient and how they can quickly solve the problem to help keep the patient safe.

Commitment to patient safety

- No preventable harm: Patient safety becomes focus
- Good quality care: best possible score for care measures
- Becoming clear: sharing success throughout the entire community

Highest quality of care

- Safe: reducing risks and harm to patients in the health care community
- Effective: providing proper training and focusing on proper safety to patient
- Time management: lowering delays on medical treatment to a patient when in need
- Productive: delivering proper care in a timely manner to the patient
- People centered: focusing on the patient and their concerns

Preventable harm to the patient
Rapid response system

Rapid response systems were made to help improve and respond to medical emergencies by patients that are in dear need of attention when it comes to medical. Rapid response teams are known as medical emergency teams that are health care providers who tend to respond to hospitalized patients that have early signs severe care issues that can cause them to not become themselves. In a hospital when a rapid response is called, a medical team shows up to a patient’s room to help the patient come back to themselves and try to make sure the patient is stable enough to treat patient. Rapid response teams help to increase better patient safety and decrease possible incidents that could occur to harm a patient. Help is always available around the clock whether that be with nurses, physicians, HUCs (Health Unit Coordinator), or a PCA (Patient Care Assistant). As a health care employee, it is our responsibility to know specific codes to call for when noticing a patient is beginning to go downhill.

Three components of Rapid Response:

1. Team response triggered

   Vital signs tend to trigger a rapid response call if either their oxygen pulse has dropped severely, or their blood pressure is extremely high or too low. A response to can come in to help revamp the patient and to run test to see why at the time the patient’s vitals changed.

2. Response team
Typically, an ICU team that is trained to handle severe situations to help bring a patient back to keep them in better care to get them in testing to find out why they went into rapid response mode.

3. Quality improvement

In the improvement of rapid response, team members tend to analyze situations to decide on what and how things went during a medical emergency to better the next time there is an emergency to better help the patient and to help the rapid response team come together to communicate on focusing on the patient.

Rapid Response Team Members

- RN (Registered Nurse)
- Nurse Supervisor
- Critical Care Nurse
- Respiratory Therapist

Rapid Response Process

- Detection
- Activation
- Response, intervention, stabilization
- Evaluation
The Impact of Patient Safety on Healthcare Delivery

When to call for code blue

1. Patient has stopped breathing
2. No pulse
3. Not able to determine if patient is breathing, has a pulse, or is very unresponsive
4. Concerned with patient’s life

Code blue is when a person/medical provider performs resuscitation motions to help a person after they have stopped breathing, or even after the person heart has suddenly stopped breathing. Rapid response teams are in the health care environment to help prevent any sudden clinical issues, cardiac arrests, or any possible deaths. Rapid response teams help the community to feel safer when in public and help to prevent any possible deaths. Training a group of health care providers to become rapid response members can keep a hospital constantly going and to better their patients safety as well.

A couple recommendations to the medical staff when caring for patients in a healthcare setting; make sure the patients are comfortable because patients are away from home and it is up to as medical employees to make patients as comfortable as possible. Good communication is key to a patient when in a healthcare setting. Good eye contact and constant reassuring patient is okay can make a patient feel comfortable if a patient is staying overnight. When speaking to a patient make good eye contact, speak clear to the patient, do not make patient feel rushed, and consider the patients language when speaking to make them feel comfortable.
In conclusion, patient safety is one of the most important concerns in a healthcare environment because it is up to us as healthcare team members to make the patients stay or visit as comfortable as possible. When it comes to patient safety, we report any incidents or problems the patient is having, and we strive to make sure the patient is safe knowing that they are surrounded by well-educated staff members that were trained properly on how to care for their patients.
Bibliography


Communication with the patient and family about all aspects of care, treatment, and services is an important characteristic of a culture of safety ("Bedside Shift Reports Can Save Lives").


Figure 2f from: Irimia R, Gottschling M (2016) Taxonomic revision of Rochefortia Sw. (Ehretiaceae, Boraginales). Biodiversity Data Journal 4: E7720. https://doi.org/10.3897/BDJ.4.e7720. (n.d.). doi:10.3897/bdj.4.e7720.figure2f


This approach improves detection of the deteriorating patient, improves patient satisfaction, reduces the rate of falls, pressure ulcers, medication errors and call light usage (Death).


