

Nurses' Compliance with Patient Safety Standards in an Accredited Hospital

Thesis

Submitted in partial fulfillment of the Master Degree in
Nursing Sciences
(Nursing Administration)

By

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B.Sc. Nursing

**Faculty of Nursing
Ain Shams University
2017**

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Acknowledgment

*First and for most, thank “**ALLAH**” to whom I relate any success in achieving any work in my life.*

*I would like to express my deep appreciation to **Dr. Samah Faisal Fakhry**, Professor of Nursing Administration, Faculty of Nursing, Ain Shams University, for her precious help, moral support, fruitful advice, kind attitude and her valuable remarks that gave me the confidence and encouragement to fulfill this work.*

*I am immensely indebted and deeply grateful to **Dr. Hemat Abd El Azeem**, Assistant Professor of Nursing Administration, Faculty of Nursing, Ain Shams University for her great encouragement, excellent guidance, powerful support, valuable constrictive advices and generous help throughout this work.*

I could never forget to offer my special thanks to the Hospital Directors, Supervisors and staff nurses as their cooperation was of great value to complete this study.

 **Shereen Wakaim Andrawes**



I would like to dedicate this work to my great Mother and father.

*My biggest thanks and heartfelt gratitude go to my dear husband **ATEF** for his unconditional love, support, and patience. I cannot end without expressing my gratitude to my family especially my daughter **Marleey** and my son **Youssef**.*

I am very grateful to my brothers, sisters and friends who have help me to finish the dissertation on time.

Thank you all

Shereen Ywakaim Andrawes

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List of Abbreviations

<i>Abbrev.</i>	<i>Full-term</i>
AHRQ	Agency for Healthcare Research and Quality
CQI	Continuous Quality Improvement
HAIs	Healthcare-Associated Infections
ICD	International Classification of Disease
IOM	Institute of Medicine
ISO	International Standardization for Organization
ISQua	International Society for Quality in Health care
JCAHO	Joint Commission on Accreditation of Healthcare Organiz
JCI	Joint Commission International
JCRs	Joint Commission Resources
LOS	Length of Hospital Stay
MCQs	Multiple Choices Questions
MOHP	Ministry of Health and Population
NHS	The National Health Service
NICU	Neonatal Intensive Care Unit
NPSG	National Patient Safety Goals
PHRplus	Partnerships for Health Reform Plus
PS	Patient Safety
PSIs	Patient Safety Indicators
QA	Quality Assurance
QPS Egypt	Quality Professional Services in Egypt
RCA	Root Cause Analysis
TJC	The Joint Commission
USAID	United States Agency International Development
UTHCPC	University of Texas Harris County Psychiatric Centre
WHO	World Health Organization
USA	United States of America

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ABSTRACT

Background: Patient safety standards are the most important of all accreditation standards. **Aim of the study:** to assess nurses' compliance with patient safety standards in an accredited hospital through assessing their knowledge, compliance, and documentation of patient safety standards. **Subjects and methods:** The study was carried out at "Dar Al-Shifa" Hospital using a descriptive cross-sectional design on 89 staff nurses. Data were collected using a self-administered questionnaire for nurses' knowledge, an observation checklist for compliance, and an audit sheet for reviewing documentation. **Results:** Nurses' age ranged between 19 and 55 years, mostly females (82.0%), with diploma degree in nursing (87.6%). Most nurses (84.3%) had satisfactory total knowledge of patient safety. Their compliance was lowest for hand hygiene (68.5%), and labeling medication containers (53.4%), while 86.5% had adequate total compliance, and 94.4% had adequate documentation. A significant positive correlation was found between the scores of compliance and related documentation ($r=0.273$). In multivariate analysis, training in leadership was a significant positive predictor of the compliance and audit score, whereas a higher qualification was a negative predictor. **Conclusion and recommendations:** The majority of staff nurses in accredited hospital have satisfactory knowledge of patient safety, adequate total compliance with patient safety standards, and adequate related documentation. All hospitals should to seek accreditation due to its positive impact.

Keywords: Patient safety, Standards, Accreditation, Compliance, Documentation, Audit

Introduction

Patient safety is a serious public health issue worldwide. Estimates show that one in 10 patients is harmed while receiving hospital care due to errors or adverse events. Of every hundred 100 hospitalized patients at any given time, 7 in developed and 10 in developing countries will acquire healthcare-associated infections. Hundreds of millions of patients are affected by this worldwide each year(*World Health Organization [WHO], 2014*).

The simplest definition of patient safety is the prevention of errors and adverse effects to patients associated with healthcare. While healthcare has become more effective, it has also become more complex, with greater use of new technologies, medicines and treatments. Health services treat older and sicker patients who often present with significant co-morbidities requiring more and more difficult decisions as to healthcare priorities. Increasing economic pressure on health systems often leads to overloaded healthcare environments(*WHO, 2017a*).

Patient safety is one of the most important points to consider in healthcare. As such, various programs are entered by healthcare institutions to monitor their services including patient safety procedures. One of these programs is accreditation. Accreditation is an internationally recognized

evaluation process used to assess, promote and guarantee efficient and effective quality of patient care and patient safety(*Al-Awa et al, 2011*).

Accreditation has been defined as an external evaluation mechanism that assesses the performance of healthcare organizations by investigating their compliance with a series of predefined, explicitly written standards (*Jaafaripooyan et al., 2011*). External assessment determines whether a healthcare organization complies with international standards and can provide quality assurance (*Greenfield and Braithwaite, 2008*).

The Accreditation programs have been increasing and spreading throughout the world from developed to developing countries from the past three decades; and today there are several accreditation programs for healthcare organizations. The accreditation process is an integral part of healthcare systems in over 70 countries (*Smits, 2014*).

In some regions, the accreditation of healthcare organizations remains voluntary, while in others it has become government mandated (*Pomey, 2010*). Its rapid growth over the last 40 years is partially attributable to media reporting of serious inadequacies in the quality and safety of healthcare services, and an escalating focus on patient safety (*Accreditation Canada, 2011*). Hospitals seeking to earn and

maintain accreditation undergo unannounced on-site visits by a team of surveyors at least once every 3 years. These surveys address a variety of domains, including the environment of care, infection prevention and control, information management, adherence to a series of national patient safety goals (NPSG), and leadership (*The Joint Commission[TJC], 2011*).

The quality improvement and patient safety standards are the most important of all accreditation standards. Continuous improvement and constant concern over reducing the risks to patients identify hospitals that are committed to the welfare of their patients. To improve quality and reduce risks, the hospital must constantly evaluate its performance and use that information to identify ways in which it can improve. This self-evaluation must be planned and ongoing and should focus on systems and processes, not solely on individual performance (*Nicklin, 2015*).

Accreditation and compliance with standards aim to improve patient safety and strengthen the quality of healthcare; as improvement in quality is believed to result in fewer mistakes, shorter delays, improvements in productivity, increased market share, and lower costs (*Halasa et al., 2015*). Healthcare compliance is the ongoing process of meeting, or exceeding the legal, ethical, and professional standards applicable to a particular healthcare