شبكة المعلومات الجامعية

التوثيق الإلكتروني والميكروفيلم

بسم الله الرحمن الرحيم

HANAA ALY

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جامعة عين شمس

التوثيق الإلكتروني والميكروفيلم

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Community Pharmacy Survey On Patient Safety Culture: A Pilot Study in Cairo

A Thesis
For Partial Fulfillment of Master Degree in Healthcare Quality

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إستبيان ثقافة سلامة المريض في صيدليات المجتمع : دراسة تجريبيه في القاهرة

رسالة

توطئة للحصول على درجة الماجيستير في جودة الرعاية الصحية

مقدمة من

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List of Abbreviations

Abbreviation	Explanation
IOM	Institute of Medicine
OTC	Over-The-Counter
CoMM	Continuous Medication Monitoring
DRPs	Drug-Related Problems
ADEs	Adverse Drug Events
WHO	World Health Organization
MedRec	Medication reconciliation
PSC	Patient Safety Culture
OR	Operating Room
PACU	Post Anesthesia Care Unit
SBAR	Situation Background Assessment Recommendation
LOS	Length of stay
HSOPSC	Hospital Survey on Patient Safety Culture
AHRQ	Agency for Health care Research and Quality
PSOPSC	Pharmacy Survey on Patient Safety Culture
PRR	Positive Response Rate
PLTC	Pediatric Long Term Care

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Community Pharmacy Survey on Patient Safety Culture: A Pilot Study in Cairo.

Abstract

Background: measuring perception of patient safety culture among pharmacists working in community pharmacies is critical to identify opportunities of improvement, and actions required to improve patient safety. The aim of this work is to measure patient safety culture among pharmacists working in community pharmacies.

Methods: a cross-sectional study was performed among pharmacists working in community pharmacies in the center and south of Cairo. Pharmacy Survey on Patient Safety Culture (PSOPSC), developed by the Agency for Healthcare Research and Quality (AHRQ), was used to collect data. PSOPSC is a self- administered questionnaire containing 36 items that measure 11 dimensions of patient safety culture.

Results: the study included 210 community pharmacies with 95% response rate. The mean age of pharmacists was 28 ± 5.4 years and males represent 55% of the sample. The overall positive response percent (PRP) was ranged between 35% and 69% with a mean of 57.4%. The highest PRP was identified in the domains of "Teamwork" (68. 97%), "Organizational learning–continuous improvement" (64.93%) and "Patient counseling" (61.83%). The PRP was less than 60% in six out of the eleven composites. The lowest PRR was found in the "staffing, work pressure, and pace "domain which scored 34.98%.

Conclusion: the study results highlight the need to put patient safety on the strategic priority at the level of community pharmacies. Attention should be given to the areas of weakness mainly in the dimension of "Staffing, Work Pressure and Pace". It is recommended to allocate staffs and working hours more adequately and train the community pharmacists on the importance and principles of patient safety.

Keywords: Patient safety, Safety culture, Community

Introduction

After the Institute of Medicine (IOM) report released in November 1999, To Err Is Human, Patient safety had become a significant concern. Health care professionals may have been shocked to find out from this study that prescription medication errors are responsible for the deaths of as many as 7,000 Americans annually, which financial cost of medication-related morbidity and mortality will value almost $77 billion yearly **(Kohn *et al*., 2000) (Grissinger and Globus, 2004).**

In the majority of cases, community pharmacies are the first point of contact used every day by millions of people looking for health care **(Butt *et al.*, 2005)(Adepu and Nagavi, 2006) (Gyawali *et al*., 2014)**. Also, these community pharmacists have a critical role in the self-management of minor diseases by using over-the-counter (OTC) drugs and enhance the overall health of communities **(Kafle *et al*., 1996) (Watson *et al.*, 2002) (Gyawali *et al.*, 2014)**.

The private community pharmacy sector is the primary source of drugs. In various developing countries, private community pharmacies are showed as a source of inexpensive medical aid **(Pharmacy, 2009).**

Several studies estimated that medication errors are the main 8th reason for death in America and responsible for the loss of nearly from 44.000 to 98.000 person yearly **(Kohn *et al*., 2000) (Sammer *et al*. 2010) (Alsaleh *et al*., 2018)** .

Patient safety is maintained when every stage of the process, from choosing the most suitable drug, to writing the

prescription, and to giving the medication is improved to avoid delays in therapy and drug mistakes. In the end, it is most substantial that active communication occurs to assure appropriate prescriptions and ideal patient care **(Hansen *et al*., 2006)**.

Several studies illustrated that achieving the safety culture needs knowledge of the values, beliefs, and standards concerning health and safety inside an institution. Therefore, it is essential to define the fundamental cultural factors that existent inside the institution, so that can change the safety culture **(Clarke, 1999) (Nieva and Sorra, 2003).**

Achieving-a culture support patient safety may be a good objective in itself right, but a further effort must be expended to understand the relationship between the measure of patient safety culture and patients results **(Hall, 2005).**

Maharajan *et al*. (2016) observed that the number of medication errors will be decreased by a community of pharmacists who having developed perceptions and a positive attitude about patient safety.

Alsaleh *et al*. (2018) emphasized that it is essential to understand the perspectives of community pharmacists of patient safety culture inside their institution. Therefore, it can assist in know areas of strength and those that need to improve, which can help facilitate decisions about procedures to improve patient safety.

Pharmacist's effect on patient-safety: There are many methods to determine the effect on the patient and the healthcare