Lay Care Worker's Perception of Patient Safety Culture

Ju Young Hong¹, Eun Kwang Yoo²

¹Dept. of Nursing, Daekyeung University, Gyeongsan 85473, Korea, ²Dept. of Nursing, Hanyang University, Seoul 04763, Korea
E-mail: glory@hanyang.ac.kr (Corresponding Author)

Abstract. This study confirms characteristics related with the general character of care workers in nursing homes. This work seeks to establish baseline data necessary to improve patient safety culture by investigating recognition about patient safety culture and related causes. From September 15th 2014 to October 11th 2014, study went through a survey targeting 101 nursing home care workers in K city. Data analysis was done by real numbers and percentages, average and standard deviation, t-test, ANOVA and Sheffe's test by using SPSS/WIN 21.0. The score for recognition about patient safety culture is 3.70 out of 5 on average, and the related factors are level of safety management, working hours per week, length of time for personal contact with a patient, and frequency of reported safety accidents. By utilizing measurement of patient safety culture as a starting point, an atmosphere for open communication between administrator and care workers is encouraged. In addition, establishment of policy, such as following appropriate arrangements of workers and construction of methodical care systems, is necessary to improve workplace of care workers and to decrease accidents.

Keywords: Care Worker, Patient Safety Culture, Nursing Home

1 Introduction

1.1 Purpose of Research

With the increase in senile chronic disease along with the aging population, difficulty family support of the old has been highlighted as a social and national obligation, rather than each individual family's problem. In accordance with this recognition, the government instituted Long-Term Care Insurance for the Aged in 2008. Since then, participation of welfare services has resulted in competition among facilities in terms of quantitative expansion, marketing, and charging for care-services, management of service quality is duly emphasized as a result. However, the main provider of real long term care services is care worker, even if the requirement of long-term care from elderly residents and related medical treatment is great. In addition, the current picture
is that many care workers offer more direct and indirect nursing and long-term care services than nurses since the number of nurses, who are the core labor force of health care, is ranges from 0.1-0.6 per resident depending on facility type, sometimes with 1 nurse or nurse's aide per 20 residents [1, 2]. In particular, elderly residents are subject to elevated concerns about patient safety in various respects, because they have lots of accident factors such as disorder of recognition, visual impairment, depression, multiple drug dosing, and decline of walking and balancing ability, resulting in a high rate of mortality compared to other age groups [3].

The Institute of Medicine (IOM) indicated we need to improve the system rather than over blame and change the patient safety culture to prevent degradation of the health care system. It emphasizes the importance of recognition of the importance of safety culture and establishing an effective system and utilization helpful to decrease the occurrence of error [4]. However, measuring patient safety culture in nursing homes is critical as the effort for prevention activity for enhancement of patient safety and an atmosphere of patient safety culture is unsatisfactory due to a tendency to conceal patient safety accidents [5]. Therefore, in this study, the researcher try to understand the recognition and related causes of patient safety culture, increase interest in patient safety through the investigating process, and offer the baseline data necessary to assess the atmosphere of patient safety culture in nursing homes targeting nursing home's care workers in K city.

2 Research Method

2.1 Research Design

This research is descriptive and seeks to understand the recognition of and related causes of patient safety culture, targeting care workers, to offer favorable services to elderly residents living in nursing homes.

2.2 Information Provider

The targets of this research were selected by convenience sampling of eight nursing homes located in K city and subjects were all pertinent care workers in each nursing home. The researcher distributed 107 of the questionnaire and collected 105 copies (collect rate: 98.1%). Finally, 101 copies (96.2%) were used for final analysis, excluding four respond was incomplete or missing questionnaires.

2.3 Research tools

Specific questions related with general and duty related characteristics of workers in nursing home, safety education, and residents’ accident reports were used based on
proceeding research and after examination by related field experts (a professor in a department of nursing, a superintendent at a nursing home, and a nurse). In addition, the researcher used patient safety culture measuring tools for Korean nursing homes, developed by Yoon [5], to understand patient safety culture of nursing homes.

2.4 Data Collection

After explaining the purpose of the research to care workers as the researcher visited, and obtaining a written consent form for research participation, the researcher issued the systemized questionnaire. In addition, participation was voluntary and the researcher explained that anonymity is ensured and the research content included in the survey is never going to be used beyond the purposes of the present research. The survey was conducted in care workers' workplaces and counseling centers in nursing homes, and the survey time was approximately 5-10 minutes.

2.5 Data Analysis

In this study, all 101 copies of the collected questionnaires were analyzed using SPSS/WIN 21.0. Data analysis by numbers and percentages, averages and standard deviations, t-test, ANOVA and Sheffe's test as a post hoc.

3 Research Results

Of the respondents, 56% were 50 years or older, 97% were females, and 96% were married, 59.4% were high school graduates and 49.5% had 50 beds or more in the facility. 48.5% indicated that the facility was at a high level of safety management, and 83.2% were willing to recommend the facility to their friends and families. In addition, 48.5% had career experience of one to two years, 43.6% worked forty hours or less a week, and 61.4% had personal contact with a patient seven to eight hours a day. Of respondents, 45.5% had experienced a safety accident reported in the past one year, 22.8% had an experience of a reported fall, 44.4% received safety education once a month, 19.9% received education about falls and 60.4% had a demand for regular education.

Perception of patient safety culture of care helpers in nursing homes scored 3.70±0.49 on average: among its sub-areas, work attitude scored the highest, with 3.99±0.49 and management activity scored the lowest, with 3.11±0.68.

For the perception of patient safety culture according to the all characteristics of the respondents, there was a statistically significant difference between facilities in the number of beds in the facility (F=8.983, p<.001), the safety management level in the facility (F=7.883, p<.001), working hours per week (F=4.843, p=.010), length of time for personal contact with a patient (F=3.163, p=.047), and frequency of reported safety accidents (F=3.301, p=.046). However, there was no significant difference in age, level of education, job duration, or safety education.
The test subjects whose facilities had 29 beds or less, had a higher safety management level in the facility, worked 40 hours or less a week, contacted 8 hours or less with each patient, and had experienced a reported safety accident twice or more, showed higher perception of patient safety culture.

When the results were put together, perception of patient safety culture was at moderate levels; therefore, it is necessary to take an interest in open communication, job satisfaction, the number of beds in the facility, safety management level in the facility, working hours, length of time for personal contact with each patient, and frequency of safety accident reports.

4 Conclusions

In conclusion, it is necessary to use measurements of patient safety culture as a starting point to create an atmosphere for open communication between managers and care workers with the objective of improving nursing home care workers' perception of patient safety culture. It is also necessary to establish a systematic system and make a policy with the aim of improving the work environment for care workers and reducing harmful accidents. In addition, it is advisable to develop a plan for effective education to meet the requirements of the workers in practice with the objective of establishing patient safety culture.

References