

A STUDY ON ASSESSMENT OF PATIENT SAFETY IN BLK SUPER SPECIALTY HOSPITAL, NEW DELHI

Presented by:

Anamika Jha

MBA HM-22

Roll No. 536

Under the guidance of:

Sameer Phandis

Associate Professor

IHMR University , Jaipur

TITLE

- **A STUDY On ASSESSMENT OF PATIENT SAFETY
IN BLK SUPER SPECIALTY HOSPITAL, NEW DELHI**



INTRODUCTION

- The purpose of international patient safety goals(IPSG) is to promote specific improvements in patient safety. The goals highlight problematic areas in health care and describe evidence and expert based consensus solutions to these problems. Recognizing that sound system design is intrinsic to the delivery to safe high-quality health care the goals generally focus on system wide solutions wherever possible.



IPSG 1 : TO ENSURE CORRECT IDENTIFICATION OF PATIENT

- Patients are identified using two patient identifiers, not including the use of the patient's room number or location.
- Patients are identified before providing treatments and procedures.
- Patients are identified before any diagnostic procedures



IPSG 2: IMPROVE EFFECTIVE COMMUNICATION

- The complete verbal order is documented and read back by the receiver and confirmed by the individual giving the order.
- The complete telephone order is documented and read back by the receiver and confirmed by the individual giving the order.
- The complete test result is documented and read back by the receiver and confirmed by the individual giving the result.
- The hospital has defined critical values for each type of diagnostic test.
- The hospital has identified by whom and to whom critical results of diagnostic tests are reported.
- The hospital has identified what information is documented in the patient record.



IPSG 3: IMPROVE SAFETY OF HIGH ALERT MEDICATION

- The hospital has a list of all high-alert medications, including look-alike/ sound-alike medications, that is developed from hospital-specific data.
- The hospital implements strategies to improve the safety of high-alert medications, which may include specific storage, prescribing, preparation, administration, or monitoring processes.
- The location, labelling and storage of high-alert medications, including look-alike/ sound-alike medications, is uniform throughout the hospital.
- The hospital has a process that prevents inadvertent administration of concentrated electrolytes.
- Concentrated electrolytes are present only in patient care units identified as clinically necessary.
- Concentrated electrolytes that are stored in patient care units are clearly labelled and stored in a manner that promotes safe use.



IPSG 4: ENSURE CORRECT-SITE, CORRECT-PROCEDURE, CORRECT-PATIENT SURGERY

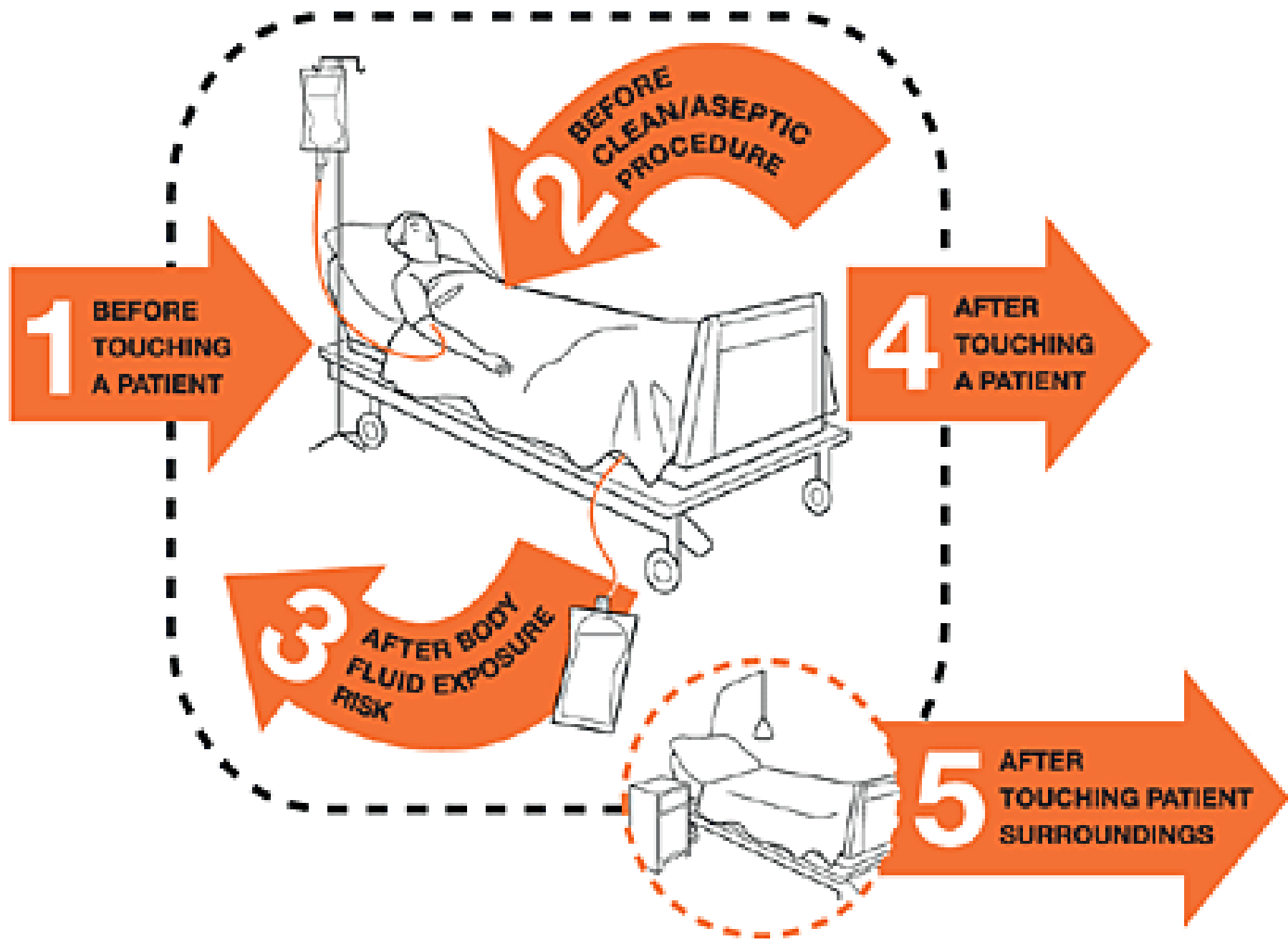
- The hospital uses an instantly recognizable mark for surgical-and invasive procedure- site identification that is consistent throughout the hospital.
- Surgical-and invasive procedure-site marking is done by the person performing the procedure and involves the patient in the marking process.
- The hospital uses a checklist or other process to document, before the procedure, that the informed consent is appropriate to the procedure; that the correct site, correct procedure, and correct patient are identified; and that all documents and medical technology needed are on hand, correct, and functional.
- The full surgical team conducts and documents a time-out procedure in the area in which the surgery/invasive procedure will be performed, just before starting a surgical/invasive procedure.
- The components of the time-out include correct patient identification, correct side and site, agreement of the procedure to be done, and confirmation that the verification process has been completed.
- When surgery is performed, including medical and dental procedures done in settings other than the operating theatre, the hospital uses uniform processes to ensure the correct site, correct procedure, and correct patient



IPSG 5: REDUCE THE RISK OF HEALTH CARE ASSOCIATED INFECTION

- The hospital has adopted currently published, evidence-based hand-hygiene guidelines.
- The hospital implements an effective hand-hygiene program throughout the hospital.
- Hand-washing and hand-disinfection procedures are used in accordance with hand-hygiene guidelines throughout the hospital.





IPSG 6: REDUCE THE RISK OF PATIENT HARM RESULTING FROM FALL

- The hospital implements a process for assessing all inpatients and those outpatients whose condition, diagnosis, situation or location identifies them as at high risk for fall.
- The hospital implements a process for the initial and ongoing assessment, reassessment, and intervention of inpatients and outpatients identified as at risk for falls based on documented criteria.
- Measures are implemented to reduce fall risk for those identified patients, situations, and locations assessed to be at risk.



RESEARCH QUESTION

- What is the adherence to patient safety goals in BLK Super Speciality hospital?



OBJECTIVES

- To assess the adherence to Patient Safety Goals at BLK Super Speciality Hospital as per International Patient Safety Goals Joint Commission International, JCI.
- Suggest the remedial actions for patient safety improvement if any.



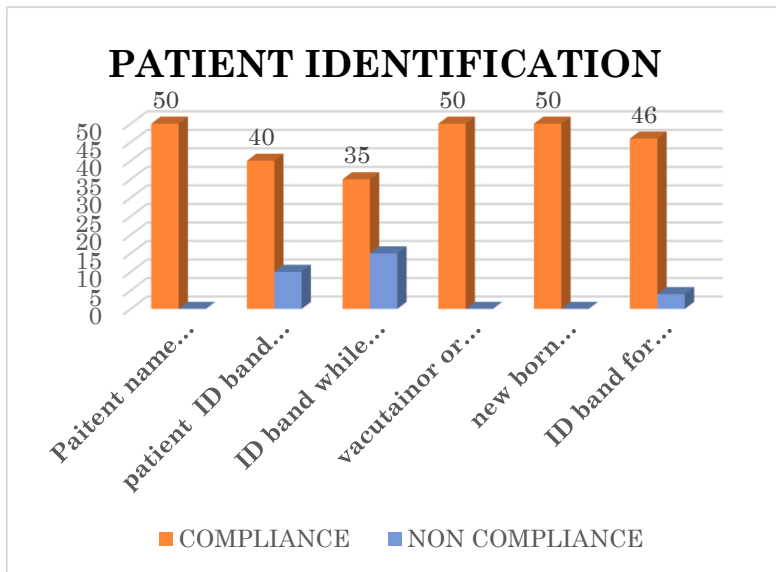
MATERIALS AND METHODS

- **STUDY DESIGN:** observational cross-sectional study
- **SAMPLE SIZE–210** respondents which includes all the staff and the patients who are admitted in hospital.
- **STUDY TECHNIQUE:** observation and documented review.
- **DATA COLLECTION TOOL** – Questionnaire (Structured)
- **SAMPLE TECHNIQUE:** non-probability convenience sampling
- **INCLUSION CRITERIA:** all the staff and patient who are admitted in hospital.
- **EXCLUSION CRITERIA:** OPD patients
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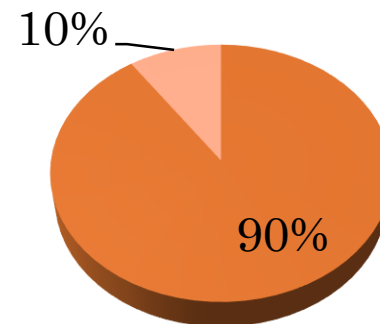
RESULTS

○ IPSG 1: PATIENT IDENTIFICATION

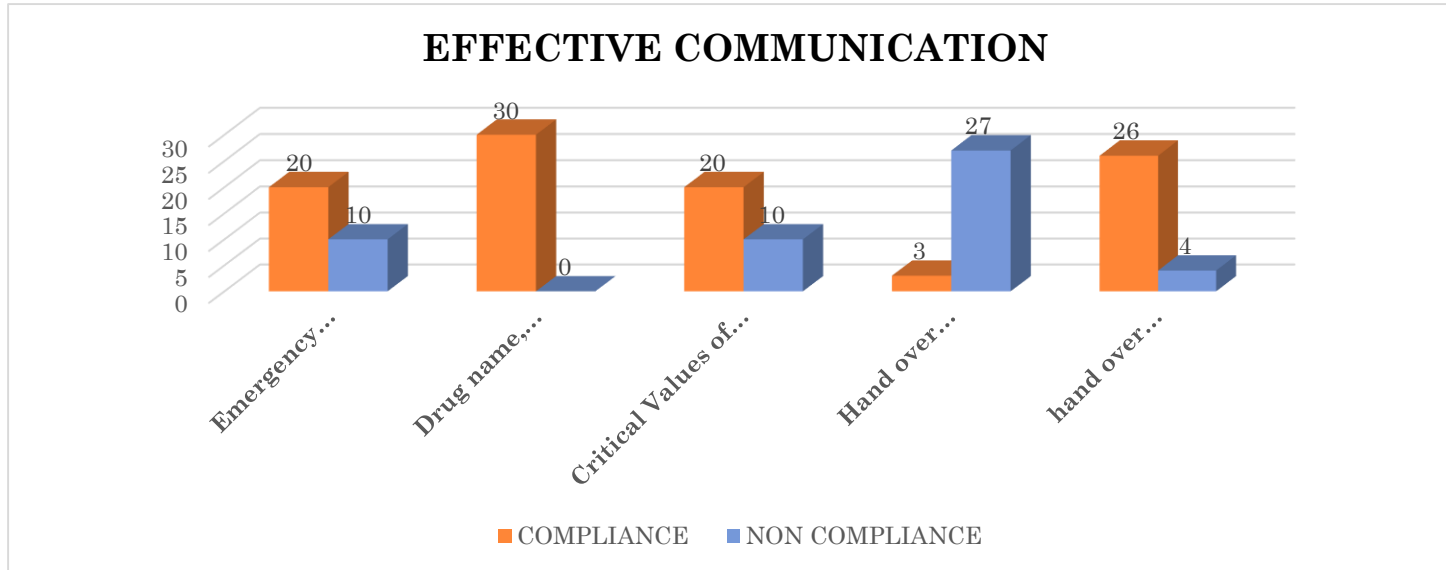


OVERALL COMPLIANCE

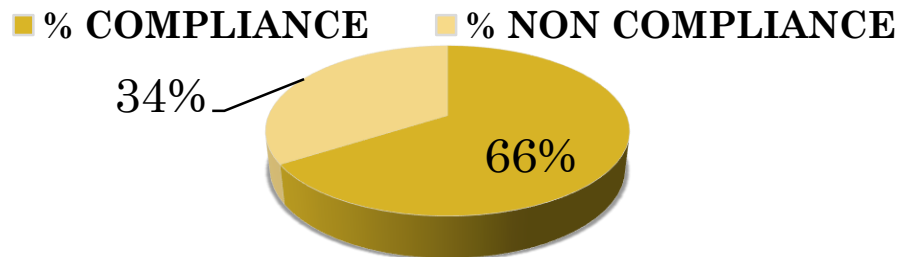
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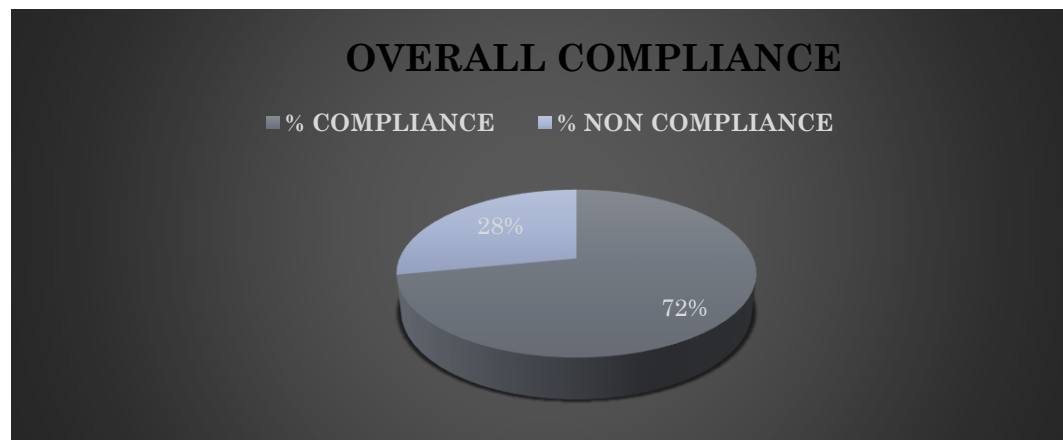
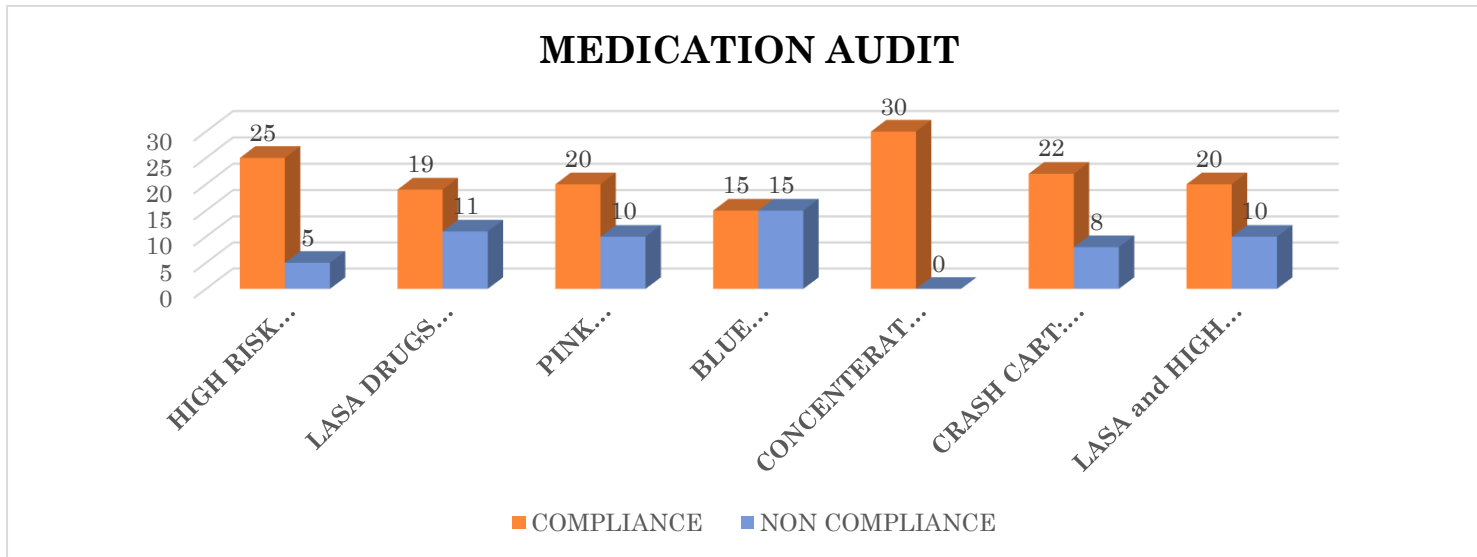
○ IPSG 2: IMPROVE EFFECTIVE COMMUNICATION



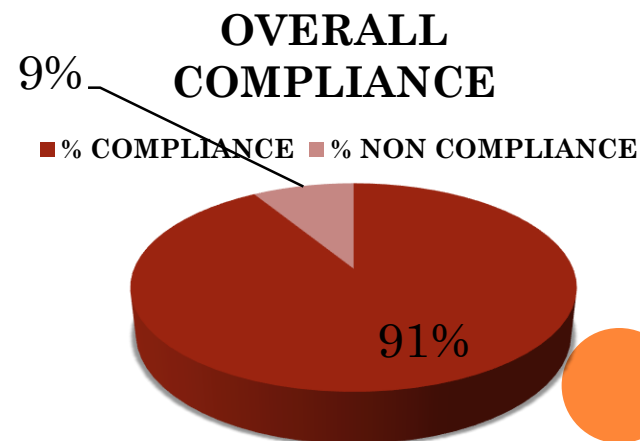
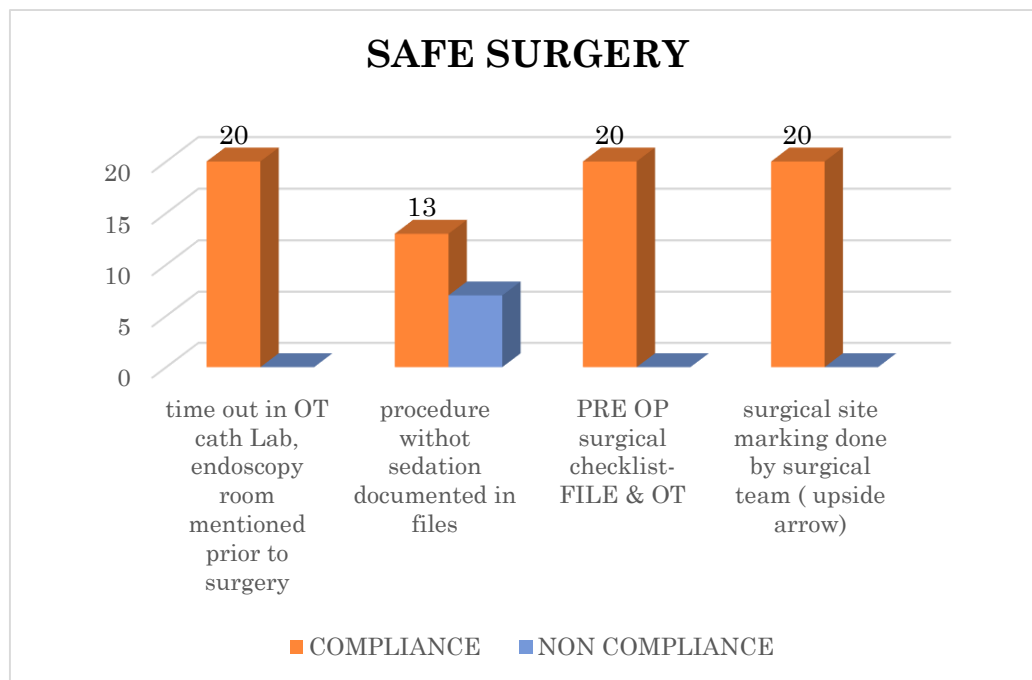
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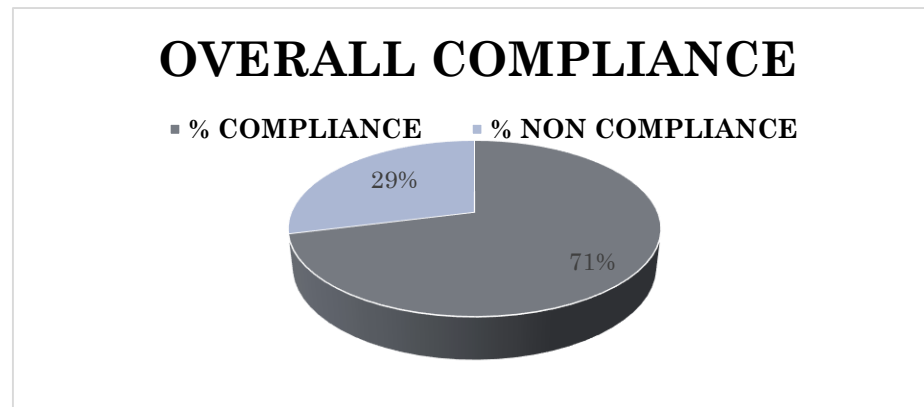
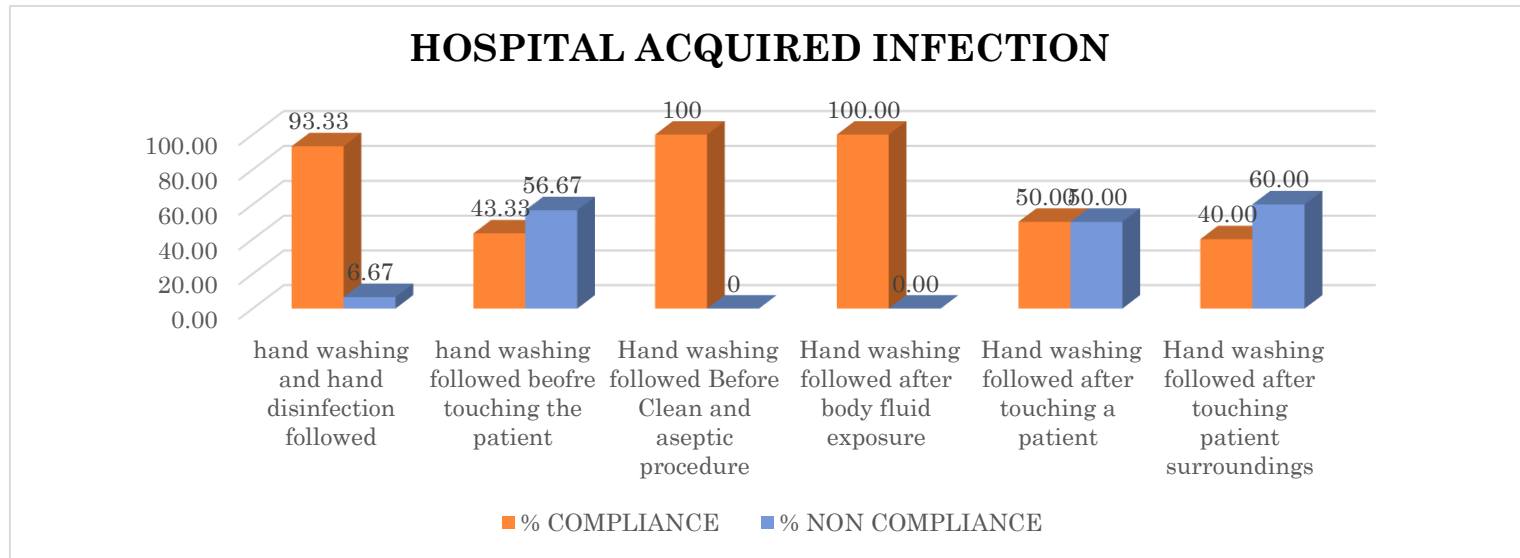
○ IPSG 3: IMPROVE SAFETY OF HIGH ALERT MEDICATION



○ IPSG 4: ENSURE SAFE SURGERY , CORRECT SITE MARKING

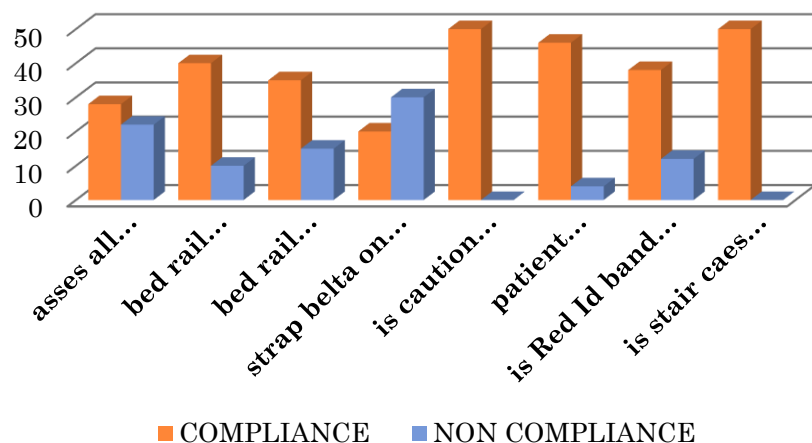


○ IPSG 5: REDUCE HEALTH CARE ASSOCIATED INFECTION



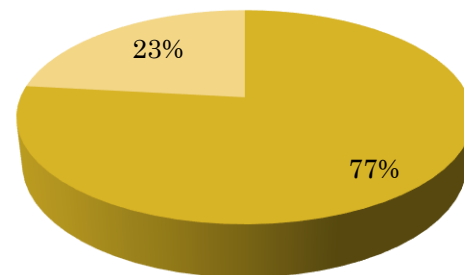
○ IPSG 6: REDUCE PATIENT HARM FROM RISK OF FALL

FALL RISK



OVERALL COMPLIANCE

■ % COMPLIANCE ■ % NON COMPLIANCE



DISCUSSION

- The reasons of lowest compliance in the following areas are:
- In patient identification the patient id band was not checked before collection of blood sample and also patient identification was not done while transferring the patient.
- In patient communication emergency verbal order were written but not signed by treating doctor within 24 hours.
- In medication labelling sticker were not placed in high risk and LASA drugs also high risk and LASA drugs were not separately placed.
- In surgical safety the procedure under local minimal and moderated sedation was not documented.
- In hospital acquired infection hand washing is not followed by after and before touching Patient also after touching patient surroundings.
- In fall risk assessment strap belt on wheel while transportation was not done also red ID band is not placed in some of the patients.

CONCLUSION

- From the study it was concluded that patient safety was one of the major area of quality parameter in hospital as patient are the revenue generators of any hospital so their care and safety should be on priority Depending upon the respondents in various dimensions of patients safety it was observed that adherence in the hospital is quite better some areas are working excellent whereas some are not. Is really the responsibility of the hospital to sensitize the staff regarding patient safety and train them on regular basis as it is the base and standard of any organization.



SUGGESTIONS

- Regular training and update sessions for every employee for their regular up gradation about quality parameters.
- Staff should be sensitized about the fall risk involved due to noncompliance of strap belt on wheelchairs.
- Regular audits of documentation should be done and the respected team should be trained accordingly.
- Staff should be sensitized about the hospital acquired infection and importance of five movements of hand hygiene.



Thank
you!!