

Perceptions of the Patient Safety Culture within the Division of Emergency, Medicine and Access (EMA)

Summary of 2023 survey findings

Thank you to those who participated in our 2023 Patient Safety Culture survey, which was a follow-up from the original survey in 2022.

What was the study?

The aim of the study was to investigate the perceptions of patient safety culture among staff working in the Division of EMA following a suite of initiatives that were put into place last year.

We used the same survey as last year, which was the Australian Hospital Survey on Patient Safety Culture 2.0. This survey assesses nine domains (or aspects) of patient safety:

1. Hospital management support for patient safety;
2. Supervisor/manager support for patient safety;
3. Reporting patient safety events;
4. Communications about error;
5. Response to error;
6. Organisational learning – continuous improvement;
7. Teamwork;
8. Communication openness; and
9. Handovers and information exchange.

There were also two overall items asking respondents to:

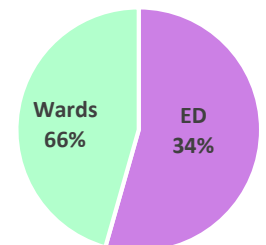
1. Rate their unit / ward / work area on patient safety, and
2. Indicate whether they would recommend a friend or relative to be treated in their unit / ward / work area.

Who responded?

We received 289 completed surveys (in 2022 we received 272).

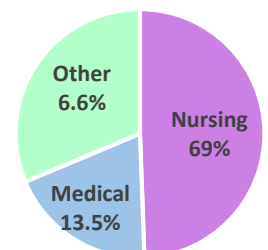
Work areas:

- 99 (34%) were from staff working in Emergency Departments (54% in 2022)
- 190 (66%) were from staff working in inpatient wards (45% in 2022)



Staff type:

- 200 (69%) were from nurses or midwives (48% in 2022)
- 39 (13.5%) were from doctors (21% in 2022)
- The remaining 50 (6.6%) were from support services, management and hospital administration (30% in 2022)



What did the responses tell us?

We are pleased that overall, the domain mean scores from this year's survey were all higher than last year's scores indicating that **perceptions of safety culture have improved** since last year, especially for patient safety events, handovers, organisational learning and communication about errors and openness.

Strengths:

The highest scores were reported for the domain **'Teamwork'**. For example, 90% of respondents reported that 'in their unit, they work together as an effective team' and 86% reported that 'during busy times, staff in this unit help each other'. These teamwork items were also the top two percentage positive scores in the 2022 survey.

High scores were also recorded for the domains **'Communication openness'**, **'Supervisor/manager support for patient safety'** and **'Reporting patient safety events'**.

We also found it encouraging that **75%** of respondents would **recommend** that a friend or relative be treated in their unit/work area; though this was slightly lower than the proportion in last year's survey (80%).

It was pleasing to see that there was an increase in the proportion of respondents who rated their unit/ward/work area as **'very good' or 'excellent'** when it comes to **patient safety** compared to last year's survey (2023 survey: **62%** vs 2022 survey: 47%).

Opportunities for improvement:

The lowest scores were reported for the domain **'Hospital management support for patient safety'**.

Low scores were also reported for **'Response to errors'** and **'Organisational learning and continuous improvement'**.

In general, doctors' perceptions of patient safety culture tended to be more positive than nurses' and midwives'. Perceptions of staff working in inpatient wards were also more positive than those working in Emergency Departments (this was a similar result to last year's survey).

Staff voices:

Comments provided by respondents described concerns about:

- **Staffing** including staff shortages especially overnight and a lack of staff wellbeing initiatives
- **Management** including perceptions that senior management is not supportive, and failures to implement quality improvement initiatives
- **Communication** including perceptions of miscommunication when patients are moved between wards
- The **environment** including workspaces that aren't optimal
- **Resourcing** including the need for equipment which worked and was safe to use.

What has happened since the survey?

The data was analysed independently by researchers from the Deakin University – Western Health research partnership. Results were discussed at the Divisional Quality, Performance and Improvement meeting.

What's next?

The following initiatives will continue to address patient safety culture within the EMA Division:

- Transparency to all staff regarding the processes for follow-up of Riskman reports, including automated Riskman notification to advise the submitter of the outcome
- Multi-disciplinary leadership rounding/walk-arounds
- Monthly EMA Quality and Safety Newsletter
- EMA Quality and Safety email address: EMAQuality&Safety@wh.org.au.
- Riskman case studies and incident reporting as standard agenda item on ward/unit-based meetings
- Case studies – This happened/we did - to highlight findings and outcomes of incidents
- Increased use of 'knowing how we are doing' boards

Feedback or Questions?

We continue to encourage you to submit any questions, concerns or feedback regarding Quality and Safety with the Division to our dedicated email address: EMAQuality&Safety@wh.org.au. This email address is monitored by our Divisional Director and Director of Nursing.