Efforts to beef up patient safety levels in KKH became a priority, especially the safety culture. Hence, the objective of this was to assess effectiveness of interventions directed at improvement of patient safety culture.

METHOD
Patient safety culture survey using the validated questionnaire of the Agency for Healthcare Research and Quality (AHRQ) tool was conducted in years 2010 and 2017.

Areas for improvement identified from the 2010 survey where the following interventions were implemented:

1. Leadership rounds*
2. Safety as a standing items at Senior Management and Medical Board meetings
3. Patient Safety Leads (PSLs)* - individuals appointed to champion safety matters within their departments.
4. Training- in-house workshops on Root Cause analysis, Human Factors and Quality Improvement and Institute for Healthcare Improvement (IHI) Open School course online.
5. Speak up for Safety- to equip staffs with skills at communicating concerns to colleagues that unintended patient harm may occur. 97% of KKH staffs were trained within a one-year period.

* These help ensured a ground-up approach to problems.

RESULTS

Figure 1- AHRQ survey results 2010 vs 2017- percentage positive responses

Improvement in percentage positive responses in all dimensions between 2010 and 2017. Teamwork within units (69% vs 81%), Management support for patient safety (73% vs 84%) and Communication openness (39% vs 50%).

Figure 2- Comfort able speaking up

Figure 3- Mode of raising concerns

Figure 4- Reaction when being spoken to

Figure 5- Reacting when person who spoke up was wrong

- 87.3% of our staff was comfortable at speaking up for safety post-training (Figure 2).
- 45.1% and 44.2% of staff surveyed were willing to speak up directly to the individual concerned and the supervisors respectively when faced with a safety issue (Figure 3).
- 97.5% of staff surveyed will respond positively when being spoken to (Figure 4).
- 91.9% would thank the individual who had spoken up even if he/she turns out to be wrong (Figure 5).

CONCLUSION AND MOVING FORWARD

There was improvement in the safety culture levels between 2010 and 2017 evidenced by increased percentage positive responses among hospital staffs.

Culture changes take time to bear its fruits allowing people to adapt incrementally, internalize efforts and embrace it at the core.

Areas for further improvement include:
- Non-punitive response to errors
- Handoffs and Transitions
- Staffing

Efforts are underway to address the above to create a psychologically safe environment.

These include programmes on Foundations Accountable and Safe Culture (ASC) Roadshows, Promoting Professional Accountability (PPA), Improving Resilience at work and promoting Joy In Work (Figure 6)

Figure 6- KKH Roadmap to Target Zero Harm

Table 1: AHRQ survey results 2010 vs 2017- percentage positive responses

<table>
<thead>
<tr>
<th>Dimension</th>
<th>2010 (%)</th>
<th>2017 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teamwork within units</td>
<td>69</td>
<td>81</td>
</tr>
<tr>
<td>Management support for patient safety</td>
<td>73</td>
<td>84</td>
</tr>
<tr>
<td>Communication openness</td>
<td>39</td>
<td>50</td>
</tr>
</tbody>
</table>

Figure 7: Improvement in percentage positive responses between 2010 and 2017.

Figure 8: Areas for improvement identified from the 2010 survey.