

The localization and preliminary application of the Patient Safety Culture Scale for Outpatients

Master Candidate: Zeng Weiyan

Supervisor: Prof. Hu Xiuying

Abstract

Background

A large number of patients come into outpatient every day, therefore safety issues are particularly important. Safety adverse events in outpatients brings out tremendous burden for families, hospitals and social community. Research shows that there is an important correlation between cultural factors and safety outcomes, improving patient safety culture of an organization can reduce the occurrence of adverse events. There is especially still a lack of measurement tools for the safety culture of outpatients in China. Therefore, this study intends to compile an outpatient safety culture scale to provide a basis for measuring and improving the safety culture of outpatients.

Objectives

1. Compile a measurement tool suitable for the safety culture evaluation of outpatients in China.
2. Reliability and validity evaluation and preliminary application of outpatient safety culture scale

Methods

1. Authorized consent and cultural debugging of the scale. After obtaining the consent of the American Institute of Health Research and Quality Management (AHRQ), the source of the scale, the Chinese version of the Clinic Patient Safety Culture Survey Scale (MOSPSC) will be translated, integrated, back-translated, and

expertly consulted to form first draft of Chinese version (MOSPSC). The first draft of the MOSPSC consists of 10 dimensions and 38 items. 30 outpatient staff were selected as subjects to conduct pre-surveys to assess the feasibility of the scale.

2. Reliability and validity evaluation and preliminary application of the scale. Using convenient sampling, strict inclusion and exclusion criteria, 396 outpatients from five five-level general hospitals in Chengdu were selected and cross-sectional survey was conducted using the Chinese version of Outpatient Safety Culture Survey Scale (MOSPSC). SPSS22.0 statistical software pair The baseline of the questionnaire was analyzed and analyzed; the feasibility of the questionnaire was analyzed, the scores of the questionnaire entries and the positive response rate were calculated; and the content validity of the Chinese version of the questionnaire was evaluated by the content validity index (CVI), Cronbach's α coefficient, parity half-coefficient And the reliability of the test-retest reliability evaluation Chinese version of the questionnaire.

Results

1. An outpatient safety culture scale is initially formed. After a rigorous cross-cultural debugging process, the final Chinese version of the scale includes 10 dimensions, 38 items, and 3 other surveys and overall evaluations of outpatient quality and safety issues. The title of the scale was revised to “Outpatient Safety Culture Survey Scale”. The scale language is clear and easy to understand. Most of the respondents completed the questionnaire within 8-10 minutes. The effective recovery rate of the questionnaire was 94.2%, which was good feasibility.

2. The safety and validity of the outpatient safety culture scale is good. The overall Cronbach's α coefficient value of the scale is 0.901, the management is 0.978, the consistency of the scale is good; the score of the semi-trusted employee is 0.907, the management is 0.971, and the semi-trust of each dimension is 0.408- Between 0.975; the employee layer scale retest reliability is 0.960, and the retest reliability of each dimension is between 0.438 and 0.943. The content validity index (I-CVI) of the item level of the scale is 0.66-1.0; the horizontal content validity of the scale S-CVI /Ave is 0.910, indicating that the scale content validity is good.

3. The safety culture of patients in all dimensions of the scale is responding. The

positive response rate of “outpatient quality and safety issues” was 71.69%-95.80%, and the positive response rate of “outpatient and other departments information exchange” was 87.55%-95.86%. The positive response rate of outpatient safety culture was 19.48%-86.25%, and the average positive response rate of 10 dimensions was 60.29%, which was lower than 74.20% in the United States. The first two dimensions with higher scores are “teamwork” (86.25%) and “employee training” (74.20%), and the lowest score is “work stress and rhythm” (19.48%). In terms of the overall evaluation of outpatient medical quality and patient safety, the positive response rate for medical quality was 31.81-41.91%, and the positive response rate for patient safety evaluation was 30.05%, and the evaluation was low.

Conclusions

1. The Chinese version of the outpatient safety scale formed in this study has been well-equalized with the source scale after strict cross-cultural debugging. The content of the scale is clear and easy to understand, and the survey is feasible.

2. The Chinese version of the scale has good content validity, internal consistency reliability and test-retest reliability, and can be compared with foreign survey data. It has good application value for assessing the safety culture status and influencing factors of outpatients in China.

3. The results of this study shows that the safety culture of outpatients in China is generally not very good. It's need to be improved in the dimensions of “work stress and rhythm”, “management support for patients”, “open communication”, “interaction on errors”, “workflow and standardization”. ”; especially the positive response rate of "work stress and rhythm" is very low (19.48%), which has become an important factor affecting the quality of outpatient medical care and patient safety, and should be highly valued by outpatient management personnel.

Keywords : Outpatient; Patient safety culture; localization; Reliability; Validity