Chapter 11

Patient Safety:

The Patient's Perspective From Public Sector Health Institutions in the Algarve Region, Portugal

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ABSTRACT

The purpose of this chapter is to give a perspective of patient safety culture by users of public health units through a qualitative analysis of open questions asked. The sample consists of 241 patients from the health region of Algarve. The open questions were the object of content analysis in thematic and categorical form, followed by lexical treatment using the Iramuteq software. From the patients' point of view, the evolution of patient safety is the result of an understanding of the meaning of the highlighted terms (safety, health, meaning), as well as of the intervention and improvement in these categories. It is known with these associations that for the patient, patient safety involves the existence of professionals for each individual (personal) and the existence of a receptive and empathic nature on the part of the professionals (human), as well as the need to demystify care for the understanding of patients (technician/knowledge) and the provision of care completely focused on the patient (attention).

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INTRODUCTION

The provision of healthcare is liable to include events with serious consequences for patients, professionals, institutions, and society in general. These are reflected in the quality of life of patients, loss of confidence in healthcare organizations and professionals, dissatisfaction and demoralization of the professionals involved, the increase of social and economic costs, cases of dispute and in reducing the possibility of reaching the expected results (NPSA, 2004). The concern with the issue of Patient Safety (PS) by various governments of different latitudes and international organizations is growing due to the high number of incidents reported by citizens, without the equivalent notice by the health professionals involved.

The negative impact resulting from healthcare incidents is a reality for the affected patient, but it must be seen as a problem to be solved by all the actors involved. The need for a paradigm shift in the health professional-patient relationship has been reinforced by the increase in the available information that the patient has about his health condition (Busch, Saxena, & Wu, 2020). In the past, he placed all confidence in health professionals without judging the consequences of his intervention in the provision of healthcare. From the moment that the patient accesses the information not only about the disease but, and above all about the possibilities of available treatments and the respective results expected from them, his ability to "confront" professionals about possible incidents resulting from the provision of care is much higher than what happened in the past, which is not always welcomed on the part of professionals (Etchegaray, Ottosen, Dancsak, & Thomas, 2017).

This should not be the major reason that moves us to contribute to a paradigm shift concerning patient safety, but rather the overriding interest in the preservation of human life, thus guaranteeing the fundamental principles that the constitutions of civilized countries safeguard regardless of economic issues. The costs associated with healthcare incidents cannot be neglected not only for the patient but for the entire health care system. The use of Accreditation Systems by health institutions is a current and growing practice, however, it is necessary to carry out processes involving all stakeholders (patients, health professionals, the community, and politicians).

The patient as the central figure must play an active role, by facilitating communication channels in health care institutions with professionals at different levels of the organization. The complementary role of this information with the one provided by health professionals would enable the establishment of an ecologically balanced patient safety system.

In the quality of health care, patient safety has been highlighted in recent years, due to the need for patients and family members to feel safe and confident about health care, as well as professionals who want to provide safe, effective, and efficient care (Fragata, 2011). The WHO also recommends that the change in behaviours and attitudes comes from the culture of security established within the organization. This is the result of individual and group values, attitudes, perceptions, skills and behavioural patterns that determine the commitment to safety. To identify areas for improvement and introduce changes in the behaviour of professionals, it is necessary to assess and monitor the organization's safety culture for continuous improvement (WHO, 2009).

Although in recent decades, health policy in Portugal has evolved significantly, it requires an assessment of the effectiveness and status of the implementation of its strategies. The small number of studies in this area in Portugal and especially in the Algarve Region (RAlg) associated with an integrated and global perspective of safety, was the determining assumption for carrying out this work. The subject of patient safety, which is currently relevant, is an unavoidable and priority issue in the management of

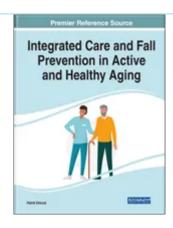
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Chapter Preview

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Introduction

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