Knowledge of the Doctors Regarding International Patient Safety Goal

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Abstract: Introduction: Patient safety remains a global priority in the ever-evolving healthcare landscape. At the forefront of this endeavor are the International Patient Safety Goals (IPSGs), a standardized framework designed to mitigate risks and elevate the quality of care. Doctors, positioned as primary caregivers, wield a pivotal role in upholding and adhering to IPSGs, underscoring the critical significance of their knowledge and understanding of these goals. This research embarks on a comprehensive exploration into the depth of Doctors 'comprehension of IPSGs, aiming to unearth potential gaps and provide insights for targeted educational interventions. Established by influential healthcare bodies, including the World Health Organization (WHO), IPSGs represent a universally applicable set of objectives spanning crucial domains such as medication safety, infection control, surgical site safety, and patient identification. Adherence to these goals has exhibited substantial reductions in adverse events, fostering an overall enhancement in the quality of care. This study operates on the fundamental premise that an informed Doctors workforce is indispensable for effectively implementing IPSGs. A nuanced understanding of these goals empowers Doctors to identify potential risks, advocate for necessary changes, and actively contribute to a safetycentric culture within healthcare institutions. Despite the acknowledged importance of IPSGs, there is a growing concern that nurses may need more knowledge to integrate these goals into their practice seamlessly. Methodology: A Comprehensive research methodology covering study design, setting, duration, sample size determination, sampling technique, and data analysis. It introduces the philosophical framework guiding the research and details material, methods, and the analysis framework. The descriptive quantitative cross-sectional study in teaching care hospitals utilized convenient sampling over six months. Data collection involved written informed consent and questionnaires, analyzed with SPSS version 23, presenting results graphically and descriptively. The chapter ensures a clear understanding of the study's design, execution, and analytical processes. Result: The survey results reveal a substantial distribution across hospitals, with 34.52% in MTIKTH and 65.48% in HMC MTI. There is a notable prevalence of patient safety incidents, emphasizing the significance of adherence to IPSGs. Positive trends are observed, including 77.0% affirming the "time-out" procedure, 81.6% acknowledging effective healthcare provider communication, and high recognition (82.7%) of the purpose of IPSGs to improve patient safety. While the survey reflects a good understanding of IPSGs, areas for improvement are identified, suggesting opportunities for targeted interventions. Discussion: The study underscores the need for tailored care approaches and highlights the bio-socio-cultural context of 'contagion,' suggesting areas for further research amid antimicrobial resistance. Shifting the focus to patient safety practices, the survey chapter provides a detailed overview of results, emphasizing workplace distribution, patient safety incidents, and positive reflections on IPSGs. The findings indicate a positive trend in patient safety practices with areas for improvement, emphasizing the ongoing need for reinforcing safety protocols and cultivating a safety-centric culture in healthcare. Conclusion: In summary, the survey indicates a positive trend in patient safety practices with a good understanding of IPSGs among participants. However, identifying areas for potential improvement suggests opportunities for targeted interventions to enhance patient safety further. Ongoing efforts to reinforce adherence to safety protocols, address identified gaps, and foster a safety culture will contribute to continuous improvements in patient care and outcomes.

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