

# Rini\_Rachmawaty\_Ariyanti\_Saleh\_2021.pdf

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## Introduction

Patient safety is a global health issue. Every year millions of patients suffer from unsafe health services. The World Health Organization (WHO) recognizes the need for the involvement of patients and family members in playing an essential role in supporting safer care. Patient involvement refers to a process in which health care providers allow patients and families to be actively involved in delivering health services. Several studies find that the involvement of patients in the salvage program can reduce incidents in hospitals. Patient involvement in care safety measures includes the willingness to answer questions, information provision, and incidents reporting.<sup>1</sup>

Patient involvement is a strategy to improve patient safety. Involving patients in their safety care does not mean that the patients must take full responsibility for their safety. However, there are patients who are unable and do not want to be involved in their care safety or optimal services from health professionals.<sup>1,4</sup> Nowadays, many patients want to actively participate in their care and patient safety activities. However, limitations, such as physical abilities and limited knowledge are necessarily considered. Therefore, strategies are needed to increase the patients' willingness to be involved in the safe care program. This literature review aims to assess strategies for increasing patient involvement in patient safety programs.

## Methods

The process of searching electronic literature was conducted in the PubMed database, Willey Online Library, and Secondary<sup>17</sup> archiving. Article search strategies used English keywords, such as "Patient Engagement" OR "Patient Involvement" AND "Patient Safety" OR "Patient Safety Goals". The articles were selected by inclusion criteria determined by researchers. These criteria included articles focusing on patient involvement in patient safety goals, cross-sectional research designs and qualitative research, published from 2008 to 2019, and full-text publications. The collected data were then extracted in each study by applying the inclusion criterion which included: author, year of publication, country of origin, study population, study design, and results of each study. The authors and two companions analyzed the selected articles to reveal data synthesis. Incomplete data in the article were excluded.

## Results

The literature search flowchart is presented in Fig. 1 and the characteristics of reviewed articles is presented in Table 1.

This study focuses on articles investigating strategies to increase patient involvement in six patient safety goals. Each patient safety goal has a strategy to increase patient involvement. Brief description of patient involvement in 6 patient safety goals is presented as follows in Table 1.

## Accuracy of patient identification

The results show that if patients are introduced and told the importance of using an identity bracelet, they will understand the benefits of the behavior and decide to get involved.<sup>4</sup> The results of this research prove that patient support will increase with the use of hospital identity bracelets by up to 90% ( $n=1411$ ). One form of patient involvement in the identification process is checking the blood bag label when it is transfused and asking health staff to check the identity bracelet.<sup>5</sup>

## Improving effective communication through hand over

The handover process besides a bed can provide an opportunity for patients to be actively involved in planning their care.<sup>6,7</sup> Furthermore, involving the patients' family in the handover process can increase patients' confidence to ask questions about the care provided.<sup>8</sup> The existence of guidelines for practical communication training for nurses and hospital policies to increase patients' knowledge and understanding in communication can increase patient involvement during handover.<sup>8,9</sup>

## Improving drug safety

Patient involvement in treatment management during hospitalization can reduce errors and increase compliance in drug use when discharging.<sup>10</sup> The importance of education through providing information and increasing interaction between doctors and patients can increase patients' knowledge about prescribed drugs. Furthermore, providing information can increase understanding of drug changes after surgery which has implications for patient safety.<sup>10</sup> Meanwhile, drug reconciliation through a web portal is proven to effectively increase the involvement of transitional patients from inpatient to outpatient.<sup>11</sup> The data show that patients can be effectively involved in providing online feedback to improve the accuracy of medical records.<sup>12</sup>

## Safe invasive surgery and procedures

Surgeons and anesthetists should pay attention to the checklist before surgery to prevent errors in the operating area. Compliance in involving patients in the identification, marks of operating theatres, and feedback between patients and medical personnel can significantly prevent surgery errors.<sup>13,14</sup>

## Reducing risks of infection through compliance with hand hygiene

Programs that involve patients in hand hygiene education are provided through hand rub media in the form of posters that present useful contents on why, when, how, and who should use hand rub. Besides, patients are encouraged to actively ask health workers to clean their hands before interacting with patients. Health workers need to explain to

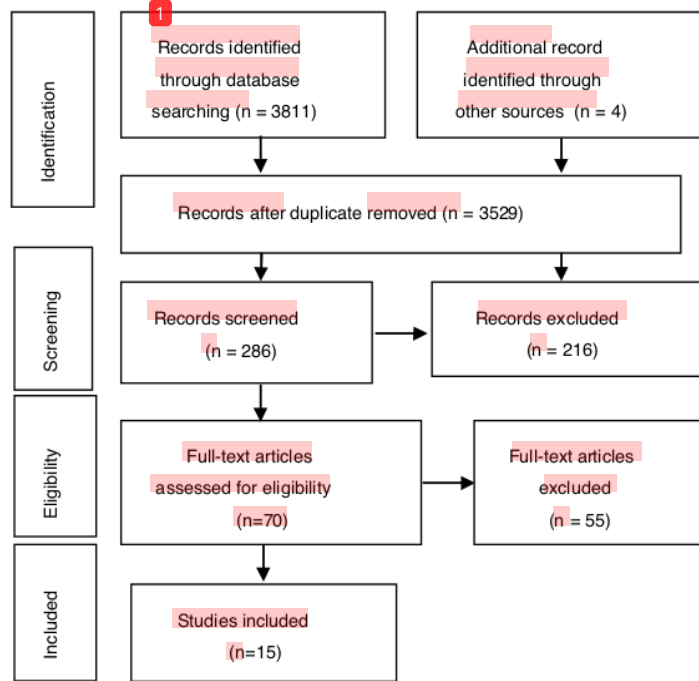


Figure 1 Literature search flowchart.

Table 1 The characteristics of articles on patient involvement in patient safety goals.

Patient safety goals	Authors	Research design	Important findings
Accuracy of patient identification	Davis, Anderson, et al. (2012) <sup>4</sup> ; Davis, Murphy, et al. (2012) <sup>5</sup>	Cross-sectional survey	Information about the benefits of hospital identity bracelets for a patient is crucial.
Improving effective communication through hand over	McMurray et al. (2011) <sup>6</sup> ; Flink Hesselinke, et al. (2012) <sup>7</sup> ; Flink, Öhlén, et al. (2012) <sup>8</sup>	Qualitative study	Beside handovers provide opportunities for patients to be actively involved in care.
Improving drug safety	Drach-Zahavy & Shilman (2014) <sup>9</sup> ; McTier et al. (2013) <sup>10</sup> ; Heyworth et al. (2014) <sup>11</sup> ; Dullabh et al. (2014) <sup>12</sup>	Cross-sectional survey	Providing information and increasing interaction between doctors and patients can increase patients' knowledge about prescribed drugs.
Safe invasive surgery and procedures	Garnerin et al. (2008) <sup>13</sup> ; Bergal et al. (2010) <sup>14</sup>	Qualitative study	Feedback and initiatives to involve patients in preoperative location marking procedures can increase patients' knowledge.
Reducing the risk of infection through compliance with hand hygiene	Pittet et al. (2011) <sup>15</sup> ; Meijide et al. (2018) <sup>16</sup>	Cross-sectional survey	Providing hand rub and posters about hand hygiene on the patient ward are crucial/beneficial.
Reducing risks of injury due to patients' falls	Shuman et al. (2016) <sup>17</sup> ; Radecki, Reynolds, & Kara (2018) <sup>18</sup>	Qualitative study	Developing patient-centered care programs can reduce excessive dependence and reduce risk factors for falls.

patients that they have rights to ask "Can you wash your hands?"<sup>15,16</sup>

### Reducing risks of injury due to patients' falls

Developing a patient-centered care program is an effective strategy for reducing risk factors due to falls. Health service providers who provide explanations to patients and families about the risk of falls and their prevention can effectively reduce patients' dependence and risk factors for falls.<sup>17,18</sup>

### Discussion

The results show that various strategies to increase patient involvement can refer to six patient safety goals. These goals can be grouped into three categories.

#### Educating patients and health service providers

Educational improvement strategies related to patient safety goals are fundamental. These strategies include providing information to patients about the importance of using hospital identity bracelets, being involved in comprehensively checking blood bags before transfusion, and significantly increasing interaction between doctors and patients inpatient medication management. The preparation of guidelines and the provision of training to improve nurses' skills and patients' communication techniques are considerably important.<sup>8</sup> The guidelines contain guidance on how to respond to patients' needs and questions during handover.<sup>6,7,9</sup> Furthermore, the guidelines contain guidance on how nurses communicate and create collaboration with patients in the prevention<sup>2</sup> of injuries from falls. Guidelines and training related to patient safety incident reporting can provide changes in nurses' behavior in implementing a culture of patient safety incident.<sup>19</sup> Provision of information either through web portals or electronic media related to drug reconciliation from inpatient to outpatient contributes to improving the safety of the treatment.<sup>11,12</sup>

#### Obtaining patients' feedback on patient safety practices

Using feedback from patients to increase patient involvement is an effective way to prevent operating location errors.<sup>13</sup> Obtaining feedback from patients necessarily considers some requirements; one of them is the availability of feedback instruments for patients and families. The instrument must consider patients' level of knowledge and language used, data collecting process, and types of data that must be synchronized with other data related to patient safety. The instruments used can be adjusted to the health care center such as; hospital and health center.

#### Involving patients in care planning

Strategies to increase patient involvement in patient safety are carried out by involving patients in care planning. The application of a patient-centered care system can enhance collaborative efforts and integrate patients and families

with care planning. Moreover, involving room heads in supervising the care process, especially inpatient handovers, can motivate staff and patients to play a more active role.<sup>9</sup> Supervision can increase commitment and work engagement of nurses.<sup>20</sup> Providing a conducive environment and supporting patient care in each ward must become a priority. The facilities include bed and hand rub alarms equipped with practical content.<sup>15</sup>

### Conclusion

The primary strategy to actively involve patients in achieving patient safety goals is compulsory. The strategy includes providing education to patients and health care providers about patient safety goals and obtaining patients' feedback about patient safety practices. The patients' feedback process can be done through surveys and incident reports. Involving patients in care planning is by implementing centered-patient care and providing an environment that supports patient care. All strategies are useful to increase patient involvement in achieving patient safety goals, but the strategies must adjust patients' needs. This study requires further research<sup>20</sup> to investigate the most effective strategies to increase patient involvement in patient safety targets in hospitals and health centers.

### Conflict of interest

The authors declare no financial or personal interests that could bias the work.

### References

1. Ward JK, McEachan RRC, Lawton R, Armitage G, Watt I, Wright J. Patient involvement in patient safety: protocol for developing an intervention using patient reports of organisational safety and patient incident reporting. *BMC Health Serv Res*. 2011;11:130. <http://dx.doi.org/10.1186/1472-6963-11-130>.
2. Schwappach D. Engaging patients as vigilant partners in safety: a systematic review. *Med care Res Rev*. 2010;67:119-48. <http://dx.doi.org/10.1177/1077558709342254>.
3. Zainuddin Badollahi M, Hasbi A. Etnografi Ruang Instalasi Gawat Darurat (IGD): Relasi Dokter dan Pasien di Rumah Sakit Umum Kota Makassar. *J Etnogr Indones*. 2018;3:250-67. <http://dx.doi.org/10.31947/etnosia.v3i2.5154>.
4. Davis R, Anderson O, Vincent C, Miles K, Sevdalis N. Predictors of hospitalized patients' intentions to prevent healthcare harm: a cross sectional survey. *Int J Nurs Stud*. 2012;49:407-15. <http://dx.doi.org/10.1016/j.ijnurstu.2011.10.013>.
5. Davis R, Murphy MF, Sud A, Noel S, Moss R, Asgheddi M, et al. Patient involvement in blood transfusion safety: patients' and healthcare professionals' perspective. *Off J Br Blood Transfus Soc*. 2012. <http://dx.doi.org/10.1111/j.1365-3148.2012.01149.x>.
6. McMurray A, Chaboyer W, Wallis M, Johnson J, Gehrke T. Patients' perspectives of bedside nursing handover. *R Coll Nurs*. 2011. <http://dx.doi.org/10.1016/j.colegn.2010.04.004>.
7. Flink M, Hesselink G, Pijnenborg L, Wollersheim H, Vernooij-dassen M, Dudzik-urbaniak E, et al. The key actor: a qualitative study of patient participation in the handover process in Europe. *BMJ Qual Saf*. 2012;89-96. <http://dx.doi.org/10.1136/bmjqs-2012-001171>.

8. Flink M, Öhlén G, Hansagi H, Barach P, Olsson M. Beliefs and experiences can influence patient participation in handover between primary and secondary care – a qualitative study of patient perspectives. *BMJ Qual Saf.* 2012; <http://dx.doi.org/10.1136/bmjqs-2012-001179>.
9. Drach-zahavy A, Shilman O. Patients' participation during a nursing handover: the role of handover characteristics and patients' personal traits. *JAN Orig Res Empir Res - Quant.* 2014; <http://dx.doi.org/10.1111/jan.12477>.
10. McTier L, Bn RN, Grad H, Adv D, Crit N, Grad C, et al. Patient participation in medication safety during an acute care admission. *Heal Expect.* 2013;1744–56, <http://dx.doi.org/10.1111/hex.12167>.
11. Heyworth L, Paquin AM, Clark J, Kamenker V, Stewart M, Martin T, et al. Engaging patients in medication reconciliation via a patient portal following hospital discharge. *J Am Med Inf Assoc.* 2014;157–62, <http://dx.doi.org/10.1136/amiajnl-2013-001995>.
12. Dullabh P, Sondheimer N, Katsch E, Evans MA. How patients can improve the accuracy of their medical records how patients can improve the accuracy of their medical records. *eGEMs (Generating Evid Methods to Improve Patient Outcomes).* 2014;2, <http://dx.doi.org/10.13063/2327-9214.1080>.
13. Garnerin P, Ares M, Huchet A, Clergue F. Verifying patient identity and site of surgery: improving compliance with protocol by audit and feedback. *BMJ Qual Saf Heal Care.* 2008;454–8, <http://dx.doi.org/10.1136/qshc.2007.022301>.
14. Bergal LM, Schwarzkopf R, Walsh M, Tejwani NC. Patient participation in surgical site marking: can this be an additional tool to help avoid wrong-site surgery? *J Patient Saf.* 2010;6: 221–5.
15. Pittet D, Panesar SS, Wilson K, Longtin Y, Morris T, Allan V, et al. Involving the patient to ask about hospital hand hygiene: a National Patient Safety Agency feasibility study. *J Hosp Infect.* 2011;77:299–303, <http://dx.doi.org/10.1016/j.jhin.2010.10.013>.
16. Meijide MS, Gonzalez ML, Gamarra Fatima M, Gago IC, Vazquez AG, Rodriguez LM, et al. Perceptions and attitudes of patients and health care workers toward patient empowerment in promoting hand hygiene. *Am J Infect Control.* 2018, <http://dx.doi.org/10.1016/j.ajic.2018.07.002>.
17. Shuman C, Liu J, Montie M, Galinato JG, Todd MA, Hegstad M, et al. Patient perceptions and experiences with falls during hospitalization and after discharge. *Appl Nurs Res.* 2016;31:79–85, <http://dx.doi.org/10.1016/j.apnr.2016.01.009>.
18. Radecki B, Reynolds S, Kara A. Inpatient fall prevention from the patient's perspective: a qualitative study. *Appl Nurs Res.* 2018;43(July): 114–9, <http://dx.doi.org/10.1016/j.apnr.2018.08.001>.
19. Hasrul W, Syahrul S, Majid A. Penerapan Budaya Pelaporan Insiden Keselamatan Pasien Di Rumah Sakit Umum Daerah Tipe B Provinsi Sulawesi Selatan. *J Panrita Abdi.* 2018;2:119–26.
20. Munawar M, Saleh A, Rachmawaty R. The influence of supervision on the performance of associate nurse in hospitals: a literature review. *J Nurs Pract.* 2019;2:91–6, <http://dx.doi.org/10.30994/jnp.v2i2.47>.

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