Measuring the Effectiveness of the Program "Leading Managers Innovation in Safety of Treatment"

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Abstract

A. Background: In recent years, the field of "Safety of treatment in the health system" has gained momentum at various levels. In order to achieve the goal of increasing safety in therapy, the Ministry of Health developed a course in cooperation with the Ramat Gan Academic College.

B. The purposes of the research:

1. Examining students' views and needs at the beginning and end of the course.

2. Student attitudes at the beginning of the program and to what extent they have changed following the experience of the program

C. The research method: The research questionnaire will be based on a valid questionnaire used by the Ministry of Health as part of the ongoing control and quality of the hospitals in Israel. The questionnaire includes questions of knowledge, attitudes, and behavior.

D. Results

Satisfaction with the program was high. 75% responded that the lecturers were very professional, and another 25% said that the lecturers were professional. Most students (88%) would recommend to their peers to participate in a similar program. 38% of the students expect to receive an official position following their studies. These students, who are relevant for the position, were more satisfied with the program and its contribution than others.

Keywords - Safety of Treatment, Effectiveness.

I. INTRODUCTION

In recent years, the field of "Safety of treatment in the health system" has gained momentum at various levels, starting with the Ministry of Health and continuing with the health funds and hospitals. The Ministry of Health in Israel leads a process of assimilating an organizational safety culture in the health system. This implementation includes a program of managers and a team of therapists from various sectors in the area of safety of treatment. Governmental and professional organizations have been established to declare patients to be informed of medical errors that cause or are likely to cause damage and to investigate unusual events routinely.

The PQI (Quality Prevention Indicators), whose nature is to provide the right treatment at the right time and at the right dosage, were also built to prevent medical errors. Such indicators exist today in the United States, Australia, Sweden, the Netherlands, the UK, Scotland, and other countries (Ansari et al. 2009: OECD, 2012: Malcolm et al. 2013). One of the ways that can help reduce the rate of errors in treatment is a dedicated program for those involved in the health system that will provide them with training in the field. In a review of 13 studies that examined the effectiveness of educational interventions in different aspects of treatment and the form of different educational interventions, it was found that most of the interventions were examined, with the exception of one study (2013 Duff J.), led to a positive outcome. (Häggman-Laitila., 2017). The Ramat- Gan Academic College, in cooperation with the Ministry of Health, has launched a unique program that provides innovative training in the field of safety of treatment and risk management in the health system. The Ministry of Health applied to the College to examine the effectiveness of this innovative program.

In 2004, AHRQ published an estimated 575,000 deaths in Medicare patients due to a mistake in medical treatment between 2000 and 2002. In addition, the human and health department of the hospital underwent medical records of hospitalized patients in 2008 reported 180,000 deaths as a result of medical care misdiagnosis only in Medicare patients.

In the past decade, hospitals and health care workers have become increasingly familiar with the phenomenon of medical errors and the damage they cause. As a result, these case studies became routine in many hospitals around the world.

II. MATERIALS AND METHODS

A. The purposes of the research

1. Examining students' views and needs at the beginning and end of the course.

2. Student attitudes at the beginning of the program and to what extent they have changed following the experience of the program.

3. Knowledge of safety issues (legislation, computerization, risk management, safety in medical technologies, and drug treatment) before and after the program.

4. Reporting safety behavior prior to the start of studies and reporting the behavior at the end of the program.

B. The research question

To what extent the program was effective in changing: knowledge, attitudes, and behavior, and to what extent students felt donated.

C. The research method

The data collection tool: The research questionnaire will be based on a valid questionnaire used by the Ministry of Health as part of the ongoing control and quality of the hospitals in Israel. The questionnaire includes questions of knowledge, attitudes, and behavior. To the questionnaire before the program, we added a chapter on needs and expectations. At the end of the program, we added a chapter on meeting expectations, a sense of contribution, and satisfaction with various aspects of the program.

Tables
The study population is presented in Table I.
Table I. The student nonulation

Table I: The student population						
		Number of	%			
		respondents				
Job	Hospital	30	96.8			
	HMO	1	3.2			
professio	doctor	2	5.9			
n	Nurse	25	73.5			
	Administrator	4	11.8			
	Dentist	1	2.9			
	pharmacist	2	5.9			
Years of	Average		16.3			
seniority)Standard		12.1)			
in the	deviation ((
professio						
n						
Course on	Participate	17	1.			
Risk	Did not	15	46.9			
Managem	participate					
ent						
Defined	Trustee / Safety	6	20			
in a	Coordinator					
workplac	Risk Manager	6	20			
e as:	There is no	18	60			
	official role in					
	the field					
Have you	Almost an	5	15.6			
previousl	event					
y reported	Event	4	12.5			
on						
	Almost an	16	50			
	event and event					
	I did not report	7	21.9			
Who	The student	18	56.3			
initiated	The direct	6	18.8			

the	manager		
program	Organization	8	25
Do you	yes	12	37.5
expect to	No	20	62.5
receive an			
official			
position			
following			
your			
studies in			
the			
program?			

Table II: Satisfaction with the program

1 able 11. k	Janstacia		e program	
	To a	very	Medium	Low
	very	much		
	great			
	extent			
The lecturers in	75%	25%		
the program				
were attentive				
to your				
questions and				
requests.				
The lecturers in	75%	25%		
the program				
were				
professionals				
and experts in				
their fields.				
You felt that	40.6%	50%	9.4%	
the material				
learned in the				
program was				
developing				
your abilities.				
You felt that	37.5%	56.3%	6.3%	
the material				
learned in the				
program was				
preparing you				
for the role in				
the safety of				
treatment.				
To what extent	28.1%	65.6%	6.3%	
it will				
implement the				
material				
studied in the				
program				

III. RESULTS AND DISCUSSION

A. Results

As can be seen from Table 2, Satisfaction with the program was high. 75% responded that the lecturers were very professional, and another 25% said that the lecturers were professional. Most students (88%) would recommend to their peers to participate in a similar program. 38% of the students expect to receive an official position following

their studies. These students, who are relevant for the position, were more satisfied with the program and its contribution than others. For example, 67% of those students that the program was relevant for them to get the job - were more satisfied with the program and its contribution, compared to 20% of those who do not expect to receive a position.

(df=2, P=0.037, =6.59)

Compared to a combination of knowledge, attitudes, and behavior data for each participant before and after the program, there was an improvement in attitudes and behavior. For example, in faithfully and effectively in preventing mistakes, the average at the beginning of studies is 2.73, and at the end of the course is 2.81(p=0.003). The report on leveraging mistakes made in the department to lead to positive changes in the department before the start of studies is 3.32, and after graduation is 3.28 (p=0.002). An interesting trend was found in the question 'We are proactive in improving patient safety' the average before the start of studies was 3.22 higher than the average at the end of studies, which stood at 3.07 (p=0.002). The decline may be due to the understanding thanks to the studies- that they did not do enough to improve safety.

B. Discussion

In Israel, as in many countries in the Western world, there is a system for the safety of treatment. The department operates within the framework of the Quality, Service, and Safety Manager, and its role is to lead a system-wide activity to improve the safety of the health care system and to reduce the number of injuries to the patient in his meetings with the health system. As part of this policy, the Ministry of Health decided to invest resources in the development of an innovative study program dealing with safety in cooperation with the Ramat- Gan Academic College. The study showed that the program, which lasted for a full academic year, helped improve the level of knowledge and proficiency of students in the field of treatment safety.

C. Conclusions

Since the study showed that the program, which lasted for a full academic year, helped improve the level of knowledge and proficiency of students in the field of treatment safety, We recommend continuing these training programs for the benefit of the patients and their families.

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