

Preserving a Culture of Safety During the Global Pandemic



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Preserving a culture of safety has long been considered a priority for healthcare organizations (HCOs) regardless of the context in which patient care is being delivered. Although there is no doubt that HCOs ought to focus on maintaining a culture of safety to ensure the resiliency of healthcare providers and patients within an ever evolving and changing system,

it is evident that the current global pandemic has placed undue stress on the healthcare system and has challenged the basic premises of safety culture.

A culture of safety exists when safe care is a core value that guides all activities within a HCO. The organization actively develops the knowledge, skills and commitment of all leaders, managers, providers, staff and patients for the provision of safe clinical care. Tools, resources, and supports are necessary to deliver safe care are easily available.¹

Enabling a culture of patient safety culture throughout HCOs necessitates the creation of an informed culture where relevant safety information is collected, analyzed, actively disseminated, and utilized for continuous quality improvement. People need to feel confident and safe to report concerns without fear of blame, and trust that concerns will be acted upon and used as learning opportunities resulting in change.²

Multiple influences are involved in creating a culture of patient safety. The Patient Safety Culture Bundle for CEOs/leaders emphasizes that strengthening a safety culture necessitates interventions that simultaneously enable, enact and elaborate in a way that is attuned to the existing culture.³ Leadership and board commitment is evident throughout the HCO and patients and families are actively engaged as partners in their care. Effective teamwork and communication is encouraged and all team members are encouraged to report, respond to and learn from safety incidents. It is also imperative that leaders invest in their HCO by providing education, training, and resources in order to establish a trusting relationship between leadership and staff.^{2,4}

The pandemic's evolving and unpredictable nature has challenged healthcare leaders, providers, regulators and policy makers, threatening the very culture of patient

safety in HCOs. Staffing shortages, family caregiver visiting restrictions, lack of access to personal protective and medical equipment, overwhelmed and beyond capacity acute and critical care bed occupancy, institutional outbreaks resulting in high mortality rates particularly in long-term care, and continuous demands on the psychological safety of healthcare providers have all impacted HCOs ability to continue to focus on and preserve safety culture. Obrien et al. suggest that actions and behaviours of frontline and local leaders, along with policies, guidelines and checklists, is what is required to support the well-being of healthcare providers during the pandemic.⁵ As well, Rangachari & Woods emphasize the importance of recognizing and responding to the psychological safety of healthcare workers during the pandemic as failing to do so could impact long-term organizational resiliency.⁶

The impact of the pandemic on safety culture is evident in Denning et al. study conducted within a large metropolitan healthcare trust using Safety Attitudes Questionnaire (SAQ) scores and incident reporting to explore the impact of Covid-19 on safety culture.⁷ Not surprisingly, training and support for redeployment were associated with higher SAQ scores and there were significant reductions in error reporting compared to the year prior to Covid.⁷ Despite these identified challenges, opportunities to remain focused on what works to promote and sustain culture, including education and support of staff, along with providing resources to ensure and to encourage a safe and just culture of reporting and responding and learning from incidents during a pandemic are evident.⁷

Wu et al, in their article 'COVID-19: Peer Support and Crisis Communication Strategies to Promote Institutional Resilience' describe the response to the pandemic as a 'marathon, not a sprint'. As such they advise that leaders need to pace themselves as HCOs respond to the second wave and recommend that leadership should be focused on resilience, structured crisis communications to provide information and empowerment; and creation of a continuum of staff support with organizations.⁸

These learnings within the current context of the pandemic can be used to support HCOs as they strive to maintain focus on prioritizing safety culture.⁸

As the world continues to respond to this unprecedented healthcare crisis, let us continue to focus on the core values of safety culture using learnings and opportunities that have resulted from enduring this 'marathon' to sustain us in our journey.

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