

Objective:

Reducing harm caused by health care is a global priority. As medical students will play an important role in future health care there is an urgent need to implement Patient Safety (PS) education in their undergraduate curriculum (Sanders et al, 2007; WHO, 2008), aiming at better event recognition and reporting.

This study wants to assess the impact of an introductory lecture on PS for undergraduate medical students on their spontaneous medical incidence reporting during a subsequent nursing internship.

Methods:

As part of the undergraduate curriculum at Hasselt University second year (undergraduate) medical students have to fulfil a two week nursing internship in a local hospital. The group of students was randomly divided in two conditions: respectively 40 (control group) and 38 students (intervention group).

No priming was performed on the control group. A week before the start of the internship the intervention group received a priming. These students were given a 1.5 hour introductory lecture on PS. This lecture was given by a patient safety specialist from one of the hospitals in the area. 34 of the 38 students of the intervention group, attended this lecture, 4 students were absent and were added to the control group.

After the internship the students had to hand in a written report reflecting on their own general experiences during the internship. No instructions regarding event reporting were listed as requirements by the medical school. The reports were analyzed for any spontaneous incidence reports.

Incident reports of both the control and the intervention group were classified using the 13 incidence types of the 2009 WHO-ICPS taxonomy (WHO, 2009).

Coding of the incidence reports was done by two independent trained coders. Krippendorff's alpha was .86.

The hypotheses were that (1) the priming would result in more reported events per student, (2) a higher proportion of students reporting (3) a higher proportion of students with multiple reports.

Results:

The intervention group reported significantly more events (average number of events is 1.70 in the control group (total n events= 75) and 2.65 in the intervention group (n events= 90)($p < .05$)). The percentage of students reporting events is not significantly different for the intervention group: 75.00% for the control group vs. 79.41% for the primed group. The percentage of students with multiple event reports seems higher in the primed group (57.57% vs. 74.07%), even though this is not statistically significant due to the rather small sample. In the intervention group there are 5 students who report more than 5 events (heavy reporters). There were no heavy reporters in the control group ($p < .01$). This means that hypotheses 1 and 3 are supported by the data.

Conclusions:

The results indicate an impact of priming PS on the average number of spontaneous incidence reporting by undergraduate medical students. This priming may easily be accomplished: in this study the effect of a 1.5 hour lecture on PS was significant.

Comparing this data with the results of earlier similar data collections shows that the average number of events reported is higher in both the control as the intervention group, indicating an overall rise in attentiveness towards events.

Spontaneous event reports of undergraduate medical students are a relatively new and unbiased data source which can lead to interesting results as they are based on a “fresh look” from relative outsiders (not unlike patients or their visitors).