



A nationwide Hospital Survey on Patient Safety Culture in Belgian hospitals: Analysis and benchmarking

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BRIEF OUTLINE OF THE CONTEXT

In 2007 the Belgian government provided a framework for the implementation of quality and patient safety initiatives in the hospitals with a yearly additional financing (annual budget of € 6.8 million in 2007). One of the main priorities in this program (2007-2012) is to promote the development of a culture of safety.

OBJECTIVES

- To measure patient safety culture in Belgian hospitals;
- To provide a benchmark report to facilitate internal assessment and learning in the patient safety improvement process.

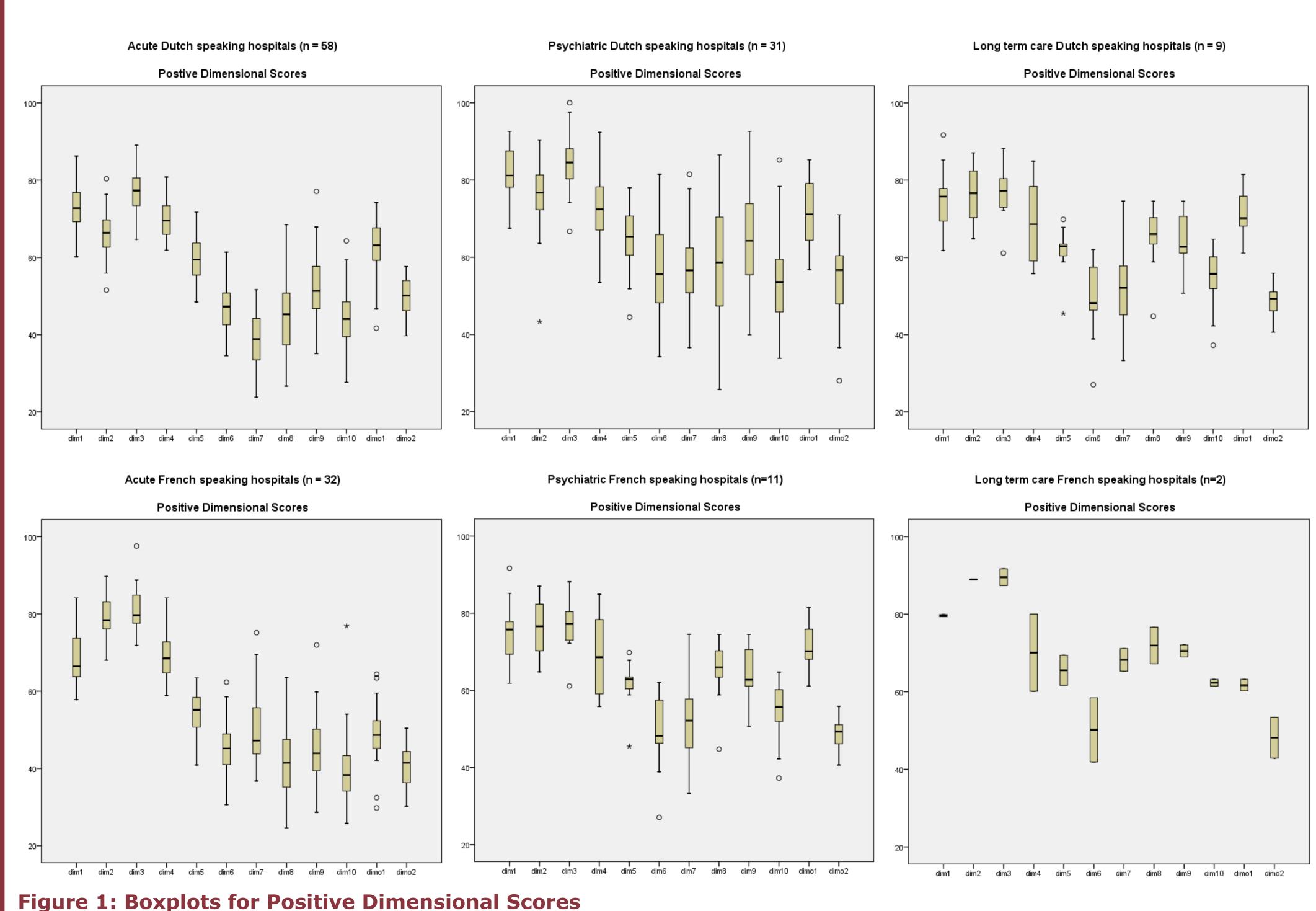
criteria and analyses. Participating hospitals were invited to submit their data to a comparative database.

Statistical Analysis

All data were analyzed confidentially. First, a mean dimensional score was calculated on the individual level. Based on these values, the dimensional scores were calculated on the hospital level.

RESULTS

90 acute, 42 psychiatric and 11 long-term care hospitals submitted their data for comparison to other hospitals (**figure 1**). The benchmark database includes 55 225 completed questionnaires (53.7% response rate).



Safety dimensions

- **D1** Supervisor/manager expectations and actions promoting safety
- **D2** Organizational learning/continuous improvement
- **D3** Teamwork within units
- **D4** Communication openness
- **D5** Feedback and communication about error
- **D6** Nonpunitive response to error
- **D7** Staffing
- **D8** Management support for patient safety
- **D9** Teamwork across units
- **D10** Handoffs and transitions

Outcome dimensions

- **O1** Overall perceptions of patient safety
- **O2** Frequency of events reported

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METHODS

Data collection

The HSPSC was distributed organization-wide in 180 (88%) Belgian hospitals participating in the federal program on quality and safety in 2007-2009. Hospitals were free to distribute the survey electronically or paper based. The questionnaire was distributed anonymously to all individuals working in direct or indirect interaction with patients.

A workshop was organized for the participating hospitals in which the objectives and the tools for conducting the safety culture measurement were explained. The measurement toolkit contained the validated version of the HSPSC (in Dutch, French and German) and a protocol. An MS Access-based instrument was designed to standardize data entry and automate the application of the exclusion

LESSONS LEARNT & MESSAGE FOR OTHERS

Healthcare organizations are interested in the potential for evaluating, benchmarking and improving safety culture measurement. Repeated measurement after several years can track evolution in patient safety culture.

Greater attention must be paid at the hospital management view of patient safety. In addition, future work should further develop methods of associating safety culture with outcomes of care.

REFERENCE

Vlayen A, Hellings J, Claes N, Peleman H and Schrooten W. A nationwide Hospital Survey on Patient Safety Culture in Belgian hospitals: setting priorities at the launch of a 5-year patient safety plan. *BMJ Qual Saf.* 2011 Jul 18.

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