

Assessing medication safety culture in Norwegian pediatric wards

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Background:

The Norwegian Medicines for Children Network (NMCN) was established in 2009 to ensure appropriate and safe medical treatment for children. Alongside the NMCN several digital tools and functions, such as KOBLE, electronic patient records and barcode scanning, have been implemented in the hospitals as preventive strategies for medication error. Particularly during medication administration, several measures have been implemented to reduce preventable patient harm. However, little is known if these measures have an impact on medication management or improve patient safety.

Aim:

To study the safety culture in the medication management process in pediatrics wards during prescribing, preparation and administration, and to identify areas for improvement.

Method:

A survey was designed and piloted with 82 participants attending the NMCN annual meeting. The survey was followingly tested on 2 physicians, 3 pharmacists and 3 nurses who attended a NMCN seminar and further adjusted by an expert panel from the NMCN. The survey was sent via e-mail to all pediatric wards. We used the SEIPS (Systems Engineering Initiative for Patient Safety) model for analysis.

Results:

A total of 102 nurses, 24 physicians and seven pharmacists responded, representing 19 out of 22 pediatric wards in Norway. The medication management processes vary depending on access and use of technological functions and/or equipment. There is a high awareness of the importance of a drug safety reporting culture, however the respondents report that it can be improved with even better inclusion and transparency.

Conclusion:

Overall, many measures have been implemented to increase patient safety in pediatric wards, but there is a crucial need for standardization through well-integrated national regulations and procedures. NMCN has thus a key role to increase accessibility on information needed for safe prescribing, preparation, and administration of medicines to children. There is also a need to encourage an open safety culture at a local and national level.

Key words:

Medication error, patient safety, pediatrics, safety culture.