

1.-Merino-Plaza MJ, Carrera-Hueso FJ, Castillo-Blasco M, Martínez-Asensi A, Martínez-Capella R, Fikri-Benbrahim N. Evolución de la cultura de seguridad del paciente en un hospital de media-larga estancia: indicadores de seguimiento. *An. Sist. Sanit. Navar.* 2017; 40: 43-56.

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2.-Carrera-Hueso FJ, Merino-Plaza MJ, Ramón-Barrios MA, López- Merino E, Vázquez-Ferreiro P, Poquet-Jornet JE. Satisfaction with computerized provider order entry systems in a Long Stay Hospital: Proposal of a Model. *Eur J Hosp Pharm.* 2017; 0:1-6.

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3.-Merino-Plaza MJ, Carrera-Hueso FJ, Roca-Castelló MR, Morro-Martín MD, Martínez-Asensi A, Fikri-Benbrahim N. Relationship between job satisfaction and patient safety culture. *J Health Med Informat.* 2017; 8 (3) (Suppl): 35

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4.-Merino-Plaza MJ, Martínez-Asensi A, Carrera-Hueso FJ, Roca-Castelló MR, Morro-Martín MD, Fikri-Benbrahim N. Increase in safety culture from the elaboration of the risk map in a chronic care hospital. *J Health Med Informat.* 2017; 8 (3) (Suppl): 61

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5.-Merino-Plaza MJ, Carrera-Hueso FJ, Arribas-Boscá N, Martínez-Asensi A, Nebot-Sanchez MC, Fikri-Benbrahim N. Monitoring indicators of job satisfaction in a chronic care hospital. *Int J Ment Health Psychiatry.* 2017; 3 (2): 61

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6.-Maria Jose Merino-Plaza, Vicenta Rodrigo-Bartual, Milagros Boza-Cervilla, Ana García-Llopis, Fernando Gomez-Pajares and Francisco Javier Carrera-Hueso. Measures taken to increase staff adherence to the hand hygiene protocol in a chronic care hospital. *J Tissue Sci Eng* 2017, 8:5(Suppl)

DOI: 10.4172/2157-7552-C1-043

## ARTÍCULOS ORIGINALES

### **Evolución de la cultura de seguridad del paciente en un hospital de media-larga estancia: indicadores de seguimiento**

Merino-Plaza MJ, Carrera-Hueso FJ, Castillo-Blasco M, Martínez-Asensi A, Martínez-Capella R, Fikri-Benbrahim N. Evolución de la cultura de seguridad del paciente en un hospital de media-larga estancia: indicadores de seguimiento. *An. Sist. Sanit. Navar.* 2017; 40: 43-56. DOI.org/10.23938/ASSN.0005

#### FUNDAMENTO

La seguridad del paciente es un reto para la asistencia sanitaria. El objetivo de este estudio es identificar las dimensiones con mayor impacto sobre la cultura de seguridad en un hospital de media-larga estancia, monitorizar su evolución y comprobar la sensibilidad de los indicadores de seguimiento.

#### MATERIAL Y MÉTODOS

Se realizaron 2 estudios transversales (2013-2015), utilizando la versión española del cuestionario "Hospital Survey on Patient Safety" (AHRQ). Variable resultado: alto grado de seguridad percibida (puntuación  $\geq$  al percentil 75). Variables predictoras: características socio-demográficas y percepciones de las dimensiones evaluadas. La asociación entre variables se cuantificó mediante OddsRatio.

#### RESULTADOS

El grado de seguridad percibida fue similar en ambos estudios: (7,81-7,48; N2013=66; N2015=92). Los aspectos mejor evaluados fueron: "Acciones de los supervisores" y "Trabajo en equipo en la unidad"; los peor evaluados fueron: "Dotación de personal", "Apoyo de la dirección" y "Trabajo en equipo entre unidades". Las variables socio-demográficas presentaron escasa significación, mientras que una percepción positiva de algunas dimensiones consideradas, sí que se asociaba a un alto grado de seguridad percibida. Los aspectos más fuertemente asociados fueron: "Acciones de los supervisores", "Franqueza en la comunicación" y "Problemas en los cambios de turno". En el estudio comparativo de los resultados, los indicadores basados en las dimensiones individuales detectaron mejor los cambios que el grado de seguridad percibida.

#### CONCLUSIONES

La evaluación periódica de la cultura de seguridad permite conocer el estado y la evolución de las percepciones de los profesionales. La elección de indicadores apropiados optimiza la información obtenida a través de estas encuestas.

# Proposed model to determine satisfaction with computerised provider order entry systems in a long-stay hospital



Carrera-Hueso FJ, Merino-Plaza MJ, Ramón-Barrios MA, López- Merino E, Vázquez-Ferreiro P, Poquet-Jornet JE. Satisfaction with computerized provider order entry systems in a Long Stay Hospital: Proposal of a Model. *Eur J Hosp Pharm.* 2017; 0:1-6. DOI: 10.1136/ejpharm-2017-001345.

## OBJETIVES

Computerised provider order entry (CPOE) systems reduce medication errors, but are not without dangers. Knowing satisfaction with the CPOE helps to improve its implementation. Our objective was to determine the satisfaction of healthcare professionals with the CPOE in a long-stay hospital and to propose a single model.

## METHODS

A cross-sectional study in a long-stay hospital. Two questionnaires were distributed to determine satisfaction with CPOE, one for medical personnel (MP) and another for nursing personnel (NP). Data collected were: sex, age and work aspects. A strategy for item refinement and creation of a single scale was designed.

## RESULTS

The overall participation rate was 63.6%, with 68 responses from the target population of 107. Overall, 72.2% (13 of 18) of MP and 40% (20 of 50) of NP were satisfied with CPOE. Regarding the specific questions on satisfaction in the questionnaires, 88.9% (n=16) of MP were very satisfied but only 56.0% (n=28) of NP. The median of each question was 4, with the exception of those for NP referring to a faster process and improved coordination, which were 3 and 3.5, respectively. The items weighing more in the second component were eliminated and the questions merged. After refining the items, a final six-item model was obtained with a single component of high reliability (Cronbach's  $\alpha=0.896$ ), which accounts for 67% of total variance.

## CONCLUSION

The degree of satisfaction with CPOE in a long-stay hospital was high, though lower in NP than MP. Obtaining a single questionnaire can facilitate this process.

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Maria Jose Merino Plaza et al., J Health Med Informat 2017, 8:3(Suppl)  
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July 17-18, 2017 | Lisbon, Portugal

-Merino-Plaza MJ, Carrera-Hueso FJ, Roca-Castelló MR, Morro-Martín MD, Martínez-Asensi A, Fikri-Benbrahim N. Relationship between job satisfaction and patient safety culture. *J Health Med Informat.* 2017; 8 (3) (Suppl): 35. DOI: 104172/2157-7420-C1-015

## STATEMENT OF THE PROBLEM

Recently, more importance has been given to the human factor and the organizational climate due to their influence on the motivation of the professionals and the improvement of performance. Some studies indicate that job satisfaction may be related to patient safety.

## AIM

To evaluate the relationship between Safety Culture and Job Satisfaction in a medium-stay hospital, showing the relationships between the dimensions that define both constructs and identifying the dimensions with the greatest impact on both variables.

## METHODOLOGY AND THEORETICAL ORIENTATION

Cross-sectional study conducted in 2015, using the Basque Health Service Job Satisfaction Survey and the Spanish version of the "Hospital Survey on Patient Safety" questionnaire (Agency for Healthcare Research and Quality).

## RESULT VARIABLES

High Job Satisfaction and High Degree of Perceived Security (score  $\geq 75$ th percentile). Predictor Variables: Socio-demographic characteristics and perception of the evaluated dimensions. The association between variables was quantified by adjusted Odds Ratio and the 95% Confidence Interval.

## CONCLUSION AND SIGNIFICANCE

The dimensions that define Work Satisfaction and Safety Culture present cross-relationships with each other and with the outcome variables, indicating that both constructs are related. These results reinforce the idea that if an adequate climate is created and Job Satisfaction increases, health workers improve their performance and increase Patient Safety.

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Merino-Plaza MJ, Martínez-Asensi A, Carrera-Hueso FJ, Roca-Castelló MR, Morro-Martín MD, Fikri-Benbrahim N. Increase in safety culture from the elaboration of the risk map in a chronic care hospital. J Health Med Informat. 2017; 8 (3) (Suppl): 61. DOI: 104172/2157-7420-C1-016

## STATEMENT OF THE PROBLEM

Risk map is a tool that allows the classification of the risks information of the Organization and to visualize its magnitude, facilitating the development of adequate strategies for their management. The Modal Analysis of Failures and Effects (AMFE) is a risk assessment tool widely used in the healthcare field. It is a simple and useful method for the analysis of potential failures with important repercussions and is useful for the analysis of risks related to patient safety.

## AIM

To identify the most frequent risks related to patient safety in a Chronic Care Hospital, to analyze its causes and to implement improvement actions.

## METHODOLOGY AND THEORETICAL ORIENTATION

Elaboration of an AMFE to visualize graphically the magnitude of the identified risks according to their Index Priority Risk (IPR). Development of QFD's to prioritize the implementation of the proposed improvement actions.

## CONCLUSION AND SIGNIFICANCE

The AMFE performed in the different processes of the Chronic Care Hospital brings a greater knowledge of them, increases awareness to avoid errors and disseminates greater awareness of a culture that improves patient safety.

International Conference on

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August 7-8, 2017 | London, UK



Merino-Plaza MJ, Carrera-Hueso FJ, Arribas-Boscá N, Martínez-Asensi A, Nebot-Sanchez MC, Fikri-Benbrahim N. Monitoring indicators of job satisfaction in a chronic care hospital. Int J Ment Health Psychiatry. 2017; 3 (2): 61. DOI: 10.4172/2471-4372-C1-006

## STATEMENT OF THE PROBLEM

Job satisfaction is an essential factor in achieving individual and collective goals. Job satisfaction surveys are a useful tool to evaluate the perception of professionals and to detect improvement areas.

## AIM

Identifying dimensions with the greatest impact on health staff job satisfaction, evaluating their evolution over time and selecting the most sensitive monitoring indicators to detecting changes.

## METHODOLOGY AND THEORETICAL ORIENTATION

Two cross-sectional studies were conducted in 2013 and 2016. The population studied was the staff of a chronic hospital in Valencia (Spain) (n2013=313; n2016=312). The assessment tool used was the Corporate Osakidetza Satisfaction Survey, based on the EFQM Excellence Model, developed and validated by the Basque Health Service for the evaluation and improvement of people's job satisfaction in public utility companies. Predictive variables were socio-demographic characteristics and professionals ratio with excellent perception of the organizational variables that define Job Satisfaction. Outcome variable was high job satisfaction, defined as a score  $\geq$  75th percentile. The association between variables was quantified by Odds Ratio.

## CONCLUSION AND SIGNIFICANCE

The choice of appropriate indicators optimizes the information obtained through job satisfaction surveys. According to our results, graphical representation of the percentage of satisfied professionals for each of the analysed dimensions is the best indicator to detecting changes.

2<sup>nd</sup> International Conference on  
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Maria Jose Merino-Plaza, Vicenta Rodrigo-Bartual, Milagros Boza-Cervilla, Ana García-Llopis, Fernando Gomez-Pajares and Francisco Javier Carrera-Hueso. Measures taken to increase staff adherence to the hand hygiene protocol in a chronic care hospital. J Tissue Sci Eng 2017, 8:5(Suppl)

DOI: 10.4172/2157-7552-C1-043

STATEMENT OF THE PROBLEM

Wound infection is a frequent complication in healing process. Implementation of adequate protocols is fundamental. The hand hygiene stands out for its importance. This measure is simple and effective, but the staff adherence is not always adequate. One component of WHO's multimodal strategy for hand hygiene, is evaluation and feedback of results. The evaluation provides indicators to measure the effectiveness of our interventions and guides us in their planning.

AIM

Evaluating the degree of compliance of the hand hygiene technique in a chronic care hospital.

METHODOLOGY AND THEORETICAL ORIENTATION

The study was conducted in 2016. Evaluating compliance with the hand hygiene technique and monitoring actions, omissions and gloves use, according to the direct observation and basic calculation forms of the WHO handbook on hand hygiene. Application of the WHO Hand Hygiene Assessment Framework tool. Data analysis was performed with SPSS.

CONCLUSIONS AND SIGNIFICANCE

Compliance with the hand hygiene protocol improved considerably with respect to the results of the previous year, which shows the effectiveness of the actions carried out during 2016. These facts encourage the orientation of the strategies, prioritizing the awareness actions of the professionals.

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