Title: Patient safety and professional discourses: implications for interprofessionalism.

Citation: Journal of Interprofessional Care, 01 July 2014, vol./is. 28/4(331-338), 13561820

Author(s): Rowland, Paula, Kitto, Simon

Abstract: Patient safety has been presented as a unifying concern across the health professions. This conceptual connection has been accompanied with efforts towards standardized, interprofessional safety competencies, as well as increased attention towards interprofessional education for systems improvement. Despite numerous program initiatives and research endeavors, progress towards improving patient safety in hospitals is viewed as disappointingly slow. This paper adds to a body of literature that suggests patient safety remains a difficult problem to solve because safety is not simply a technical issue, but is a practice embedded in organizational and professional contexts. In this paper, we explore the differences between the professions, as different professional groups intersect with the ways patient safety is thought about, talked about, and known about in an acute care hospital in Canada. We draw on findings from a critical discourse analysis of documents related to patient safety, as well as transcripts from interviews from (a) formal health care leaders and (b) practicing clinicians from medicine, nursing, occupational therapy, physiotherapy, and social work. This analysis suggests implications for the way different professions may or may not work with one another in the service of patient safety.

Source: CINAHL

Title: Let’s all play our part to advance patient safety.

Citation: Modern Healthcare, 02 June 2014, vol./is. 44/22(26-26), 01607480

Source: CINAHL

Full Text: Available from EBSCOhost in Modern Healthcare
Title: NICE staffing ratios must cover wider team.

Citation: Frontline 21 May 2014, vol./is. 20/9(13-13), 20454910

Author(s): Allen, Daniel

Title: Safeguarding vulnerable adults.

Citation: Nursing Standard, 21 May 2014, vol./is. 28/38(37-41), 00296570

Author(s): Betts, Virginia, Marks-Maran, Diane, Morris-Thompson, Trish

Abstract: This article explores some of the issues surrounding safeguarding vulnerable adults, examines some of the related legislation and literature, and outlines the responsibilities of those who care for this patient group. The article describes how one hospital that specialises in caring for people with early-onset dementia, Huntingdon's disease and alcohol-related brain injury who require additional support, has provided staff with appropriate evidence-based information about safeguarding adults.

Full Text: Available from EBSCOhost in Nursing Standard

Title: Patient safety reports central to nurse and HCA training review.

Citation: Nursing Times, 14 May 2014, vol./is. 110/20(5-5), 09547762

Author(s): Ford, Steve

Full Text: Available from ProQuest in Nursing Times

Title: Preventing health care-associated harm in children.

Citation: JAMA: Journal of the American Medical Association, 07 May 2014, vol./is. 311/17

Author(s): Walsh, Kathleen E, Bundy, David G, Landrigan, Christopher P

Source: CINAHL

Full Text: Available from JAMA in Rotherham FT Library & Knowledge Service
Title: "We need to deliver meaningful safety improvements for patients".

Citation: Nursing Times, 07 May 2014, vol./is. 110/19(7-7), 09547762

Author(s): Cummings, Jane

Full Text: Available from ProQuest in Nursing Times

Title: Inpatient management of diabetes in adults: safety and good practice.

Citation: British Journal of Hospital Medicine (17508460), 01 May 2014, vol./is. 75/5(258-263),

Author(s): Abou-Saleh, Ahmad, Haq, Masud, Barnes, Dennis

Source: CINAHL

Full Text: Available from EBSCOhost in British Journal of Hospital Medicine (17508460)

Title: OneTogether. A collaborative approach to reduce surgical site infection.

Citation: Journal of Perioperative Practice, 01 May 2014, vol./is. 24/5(12-13), 17504589

Source: CINAHL

Full Text: Available from EBSCOhost in Journal of Perioperative Practice

Title: Patient safety in nursing education: Contexts, tensions and feeling safe to learn.

Citation: Nurse Education Today, 01 February 2014, vol./is. 34/2(277-284),

Author(s): Steven, Alison, Magnusson, Carin, Smith, Pam, Pearson, Pauline H.

Abstract: Summary: Education is crucial to how nurses practice, talk and write about keeping patients safe. The aim of this multisite study was to explore the formal and informal ways the pre-registration medical, nursing, pharmacy and physiotherapy students learn about patient safety. This paper focuses on findings from nursing. A multi-method design underpinned by the concept of knowledge contexts and illuminative evaluation was employed. Scoping of nursing curricula from four UK university programmes was followed by in-depth case studies of two programmes. Scoping involved analysing curriculum documents and interviews with 8 programme leaders. Case-study data collection included focus groups (24 students, 12 qualified
nurses, 6 service users); practice placement observation (4 episodes=19hrs) and interviews (4 Health Service managers). Within academic contexts patient safety was not visible as a curricular theme: programme leaders struggled to define it and some felt labelling to be problematic. Litigation and the risk of losing authorisation to practise were drivers to update safety in the programmes. Students reported being taught idealised skills in university with an emphasis on what not to do. In organisational contexts patient safety was conceptualised as a complicated problem, addressed via strategies, systems and procedures. A tension emerged between creating a no blame culture and performance management. Few formal mechanisms appeared to exist for students to learn about organisational systems and procedures. In practice, students learnt by observing staff who acted as variable role models; challenging practice was problematic, since they needed to fit in and mentors were viewed as deciding whether they passed or failed their placements. The study highlights tensions both between and across contexts, which link to formal and informal patient safety education and impact negatively on students' feelings of emotional safety in their learning.

Title: Promoting patient safety

Citation: Nursing standard (Royal College of Nursing (Great Britain) : 1987), March 2014, vol./is. 28/29(61), 0029-6570 (2014 Mar 19-25)

Author(s): Kynaston L.

Full Text: Available from EBSCOhost in Nursing Standard

Title: Safety watch: Reducing constant observation through nurse empowerment and accountability

Citation: Journal of Nursing Administration, April 2014, vol./is. 44/4(237-243)

Author(s): Wray K., Rajab-Ali R.

Abstract: Safety watch (SW), a nurse-driven surveillance program, provides a framework for the appropriate level of patient observation. It empowers nurses to initiate flexible levels of patient safety observation that can be adjusted based on the patient's need and be discontinued safely at the earliest opportunity. The SW program resulted in dramatic reductions in constant observation and restraint use while sustaining quality of care. Copyright 2014 Wolters Kluwer Health.
Title: Syringe driver safety issues: an update.

Citation: International Journal of Palliative Nursing, March 2014, vol./is. 20/3(115-9), 1357-6321;1357-6321 (2014 Mar)

Author(s): Lee PT

Full Text: Available from EBSCOhost in International Journal of Palliative Nursing

Title: Promoting patient safety.

Citation: Nursing Standard, March 2014, vol./is. 28/29(61), 0029-6570;0029-6570 (2014 Mar 19-25)

Author(s): Kynaston L

Source: MEDLINE

Title: Human factors systems approach to healthcare quality and patient safety.

Citation: Applied Ergonomics, January 2014, vol./is. 45/1(14-25), 0003-6870;1872-9126 (2014 Jan)


Abstract: Human factors systems approaches are critical for improving healthcare quality and patient safety. The SEIPS (Systems Engineering Initiative for Patient Safety) model of work system and patient safety is a human factors systems approach that has been successfully applied in healthcare research and practice. Several research and practical applications of the SEIPS model are described. Important implications of the SEIPS model for healthcare system and process redesign are highlighted. Principles for redesigning healthcare systems using the SEIPS model are described. Balancing the work system and encouraging the active and adaptive role of workers are key principles for improving healthcare quality and patient safety. Copyright 2013 Elsevier Ltd and The Ergonomics Society. All rights reserved.

Source: MEDLINE
Title: Strategies for enhancing the delivery of person-centred care

Citation: Nursing Standard, May 2014, vol. 28, no. 39, p. 37-41, 0029-6570 (May 28, 2014)

Author(s): Perez-Merino, Ruth

Abstract: The implementation of person-centred care is considered complex and hard to sustain in today's NHS. To provide a dignified and caring experience to all, equality in health should consider individuals or groups at risk of isolation, as well as those who may not wish to, or may not be able to, self-manage fully. This may include, for example, the very young, older people, under-represented groups, homeless people or unconscious patients. This article considers varying levels of intervention in health and illness to make health and social care services sustainable and accessible to all. [PUBLICATION] 36 references

Source: BNI

Full Text: Available from EBSCOhost in Nursing Standard

Title: "Staffing guidance falls short for patient safety".

Citation: Nursing Times, April 2014, vol./is. 110/15(1), 0954-7762;0954-7762 (2014 Apr 9-15)

Author(s): Middleton J

Source: MEDLINE

Full Text: Available from ProQuest in Nursing Times

Title: Patient safety: a view from across The Pond.

Citation: British Journal of Nursing, April 2014, vol./is. 23/7(396-7), 0966-0461;0966-0461 (2014 Apr 10-23)

Author(s): Tingle J

Publication Type: Journal Article

Source: MEDLINE

Full Text: Available from EBSCOhost in British Journal of Nursing