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Safe behaviours and acceptance of the use of checklists in urban obstetric units in Colombia[☆]

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ABSTRACT

Introduction: The use of checklists in healthcare, has proven to be a useful means for improving safety in care and reducing errors and adverse events; however, acceptance and use by healthcare practitioners is still an important problem.

Objective: To describe the degree of knowledge and acceptance of the use of checklists, and to determine the percentage of safe practices performed by healthcare workers during obstetric care in obstetrics and gynaecology units in Colombia.

Method: Cross-sectional observational study. The sample consisted of healthcare teams of the obstetric areas in three institutions. The acceptance survey was given based on convenience sampling to 38 healthcare workers in institution A, 74 in institution B and 50 in institution C, and 29 maternal care observations were made in each institution.

Results: It was found that healthcare workers are aware of the checklists, have used them or are using them, and show an intermediate level of favourable attitudes, institution A being the one with the most favourable attitude towards their use. The three institutions had similar percentages of compliance with safe behaviours (72-79%), but some had lower values in areas such as confirming or administering antibiotics, compliance with the hand washing protocol, and processes related to patient or family education.

Conclusions: Healthcare professionals working in the obstetric units assessed had, at the time, knowledge and experience with the use of checklists and relatively good attitudes towards them; moreover, the level of compliance with safe behaviours was medium to high.

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Comportamientos seguros y aceptación de listas de verificación en tres unidades de ginecología y obstetricia de tres instituciones de áreas urbanas de Colombia

RESUMEN

Palabras clave:

Seguridad del paciente
Obstetricia
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Mortalidad materna
Mortalidad infantil

Introducción: El uso de listas de verificación en el área de la salud, ha mostrado ser una herramienta útil para mejorar la seguridad en la atención, disminuir errores y eventos adversos; sin embargo, uno de los principales problemas se presenta en la aceptación y uso que los trabajadores de la salud hacen de las mismas.

Objetivo: Describir el grado de conocimiento y aceptación en el uso de listas de verificación y determinar el porcentaje de prácticas seguras que realizan los trabajadores de la salud durante la atención del parto en tres unidades de ginecología y obstetricia en Colombia.

Metodología: Estudio observacional de corte transversal. La muestra estuvo conformada por equipos de la salud de las tres instituciones que hicieron parte del estudio en las áreas de atención a gestantes. Se aplicó, bajo un muestreo por conveniencia, la encuesta de aceptación a 38 trabajadores de la salud de la institución A, 74 de la B y 50 de la C y se realizaron 29 observaciones de atención a gestantes en cada centro.

Resultados: Se encontró que los trabajadores de la salud conocen, han usado o usan listas de verificación y muestran actitudes favorables en un nivel intermedio, siendo la institución A la que mostró actitudes más favorables al uso de las mismas. Las tres instituciones tuvieron un porcentaje similar en el cumplimiento de los comportamientos seguros (72% - 79%), pero algunos de éstas mostraron valores menores en aspectos como: confirmar o suministrar antibióticos, cumplir el protocolo del lavado de manos y los procesos relacionados con la educación a los pacientes o acompañantes.

Conclusiones: Los trabajadores de las unidades de obstetricia evaluadas tenían, en ese momento, conocimientos y experiencia en el uso de listas de chequeo y actitudes algo favorables frente a las mismas; además, el nivel de cumplimiento de comportamientos seguros estuvo en un porcentaje medio-alto.

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Introduction

The use of checklists in healthcare has been shown to be a useful means for improving safety in healthcare, reducing errors and adverse events, enhancing the exchange of information, and improving work team cohesiveness.¹⁻⁴ Workers are responsible for completing this type of tool and, consequently, it is important to design strategies to assess the degree of knowledge among the staff of the tools that they will use, as well as to determine their willingness to implement them in their units; this in order to create programmes that can have an impact on compliance with practices designed to improve patient safety.

However, evidence shows that despite the positive results of the use of checklists in healthcare, implementation and compliance by healthcare staff has not been an easy task. Some of the hurdles that have a direct impact on acceptance of these tools are related to the lack of staff and the fact that they perceive the tool as a burden and that completing it takes away time from their work and disrupts the workflow. Likewise, it has been reported that the staff feels that checklists do not favour communication, imposes a delay, and increases the amount of paper work and the overall workload.^{5,6}

This means that before implementing checklists, it is important to know the perception of healthcare professionals regarding their use and usefulness. It is also paramount to have a clear knowledge of safe practices performed routinely and to identify which of them are forgotten or omitted during the care process in order to determine compliance with checklists and the usefulness of their implementation.⁷⁻¹⁰

In 2015, the World Health Organisation (WHO) launched the Safe Childbirth Checklist, aimed at improving essential practices in maternal and perinatal care. This list includes 29 behaviours that need to be checked at four specific times during delivery care: admission, before childbirth, after childbirth and before discharge. Efforts are currently being made to implement it in different parts of the world.¹¹

This research is part of a project designed to implement the safe childbirth checklist in Colombia. This requires answers to the following questions: which safe practices are performed or omitted by healthcare workers during delivery and childbirth in the obstetric and gynaecology (OB/GYN) units in Colombia; and what is the level of knowledge and acceptance of the use of checklists among healthcare staff in the OB/GYN units in Colombia.

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