

**PATIENT SAFETY CULTURE IN  
YANGON CHILDREN HOSPITAL**

**Thesis submitted to  
the Postgraduate Academic Board of Studies  
University of Public Health, Yangon  
as the partial fulfillment of the requirements  
for the Degree of Master of Hospital Administration (MHA)**

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M.B., B.S  
Dip Med. Sc. (Hospital Administration)  
2019**

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**This thesis has been approved by the Board of Examiners**

**Chief Examiner**

**Examiner (1)**

**Examiner (2)**

## **ABSTRACT**

Patient safety is a serious global public health concern. During health care delivery, unexpected and unwanted events can take place in any setting. To overcome these events and deliver quality of healthcare, patient safety cultures among health workers need to be assessed and promoted. For this purpose, the status of patient safety culture was assessed in Yangon Children Hospital. The study was a cross-sectional study with mixed method and was carried out from August to November, 2019 to assess the current status of patient safety culture in Yangon Children Hospital. Among healthcare providers, (20) assistant surgeons and (83) nurses participated and responded self-administered questionnaires including background characteristics, twelve dimensions of patient safety culture and two more questions of overall patient safety grade and number of events reported in the past 12 months. In-depth interviews also were carried out to eight participants from all stratum of doctors, sister, staff nurse and trained nurses. Most of the participants had 6 months to 1 year current hospital experience. Most AS and trained nurses had 6 months to 1 year current hospital experience and most of staff nurses and sisters had more than 5 years current hospital experience. The most common average working hours per week was 40-49 hours. Half of AS and trained nurses had 6 months to 1 year professional experience. Overall results of patient safety culture in Yangon Children Hospital showed ten dimensions in the area of strength which is 75% or more in positive response to dimensions of patient safety culture; teamwork within unit, organizational learning- continuous improvement, feedback and communication about error, communication openness, events reporting frequency, teamwork across unit, overall perception of patient safety, management support for patient safety, handoffs and transitions, supervisor expectation. Non-punitive response to error was in the area of potential improvement and staffing was in the area of weakness. According to chi square test, there was no significant association between the background characteristics of health care providers of YCH and patient safety culture dimensions. The six themes were found from the findings of in-depth interviews. The consistent findings occurred in both quantitative and qualitative were staffing dimensions. All of the respondents mentioned not enough staff, poor job description and over loaded work. Most of the respondents reported about errors but not all received feedback properly. All of the respondents took handover with verbally

or with record books. Most of the respondents follow the guidelines but only few stated they did not follow sometimes during live saving events. They had awareness of safety precautions during transportation and fall and accidents. Patient safety culture in Yangon Children Hospital was mostly positive culture according to results apart from above non-punitive response to error and staffing dimensions. To maintain good culture, medical and nursing educations on patient safety culture should be continued and supported to the weak area.