

Patient Safety in Primary Health Care, Case Study of Cartaxo PrimaryCare Health Center

Pedrosa, V. (1) & Fernandes, A. (2)

(1) ACES Lezíria, Lecturer ESSlei, PhD Student ISCTE-IUL (vanda.varela@ipleiria.pt); (2) Lecturer ISCTE-IUL Portugal

Introduction & Objective

Worldwide we should achieve more efficient, clinically more effective and safer health care organizations, specially those in Primary Care (PC), where knowledge is less. For greater Patient Safety (PS) in PC Organizations, professionals are the key to ensure safety, with the involvement from Patient & Family. The goal is *understand what Professionals Health Center Cartaxo Know and consequently incorporate PS in professional activity*

Methods

1 Health Center
5 Functional UNITS
40 Health Professionals

USF A; USF B; UCC; URAP; USP
GP's; Nurses; Oral Higiene; Phisioterapia; Cardiopneumology

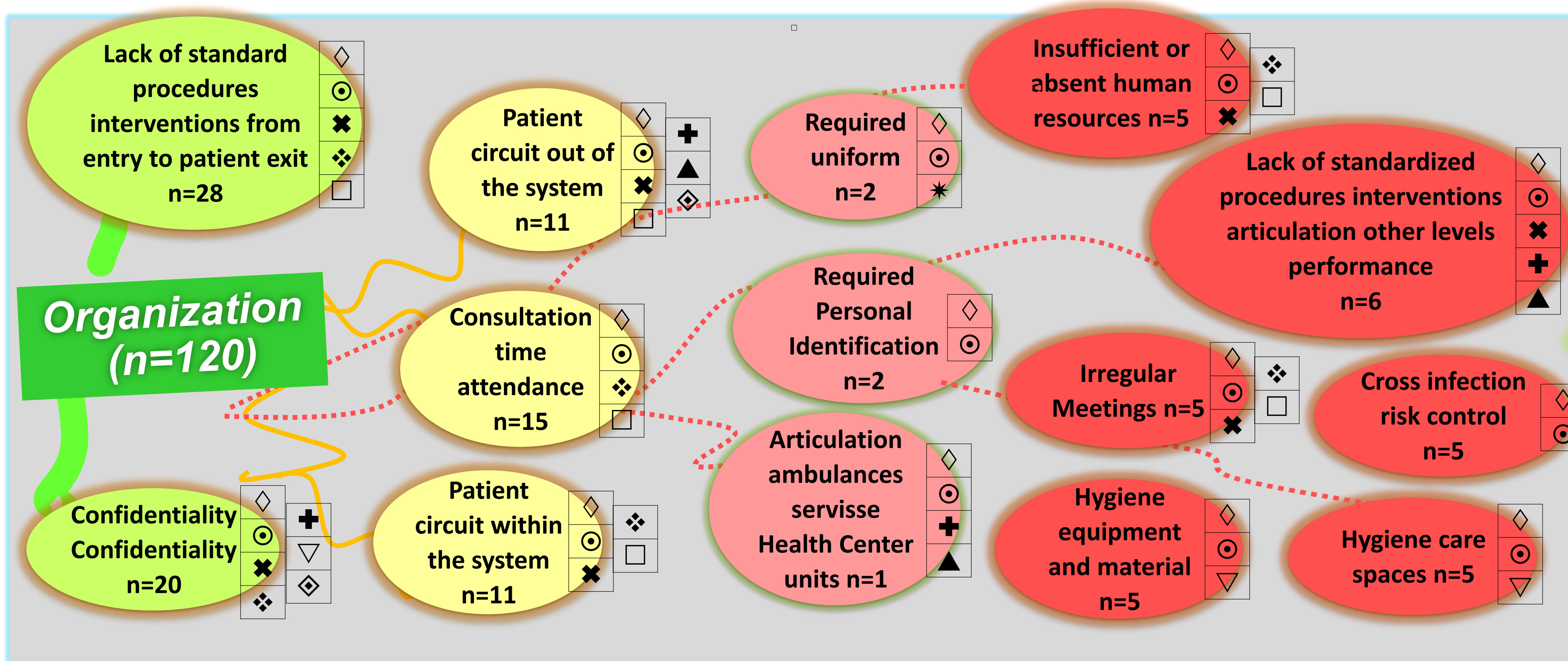
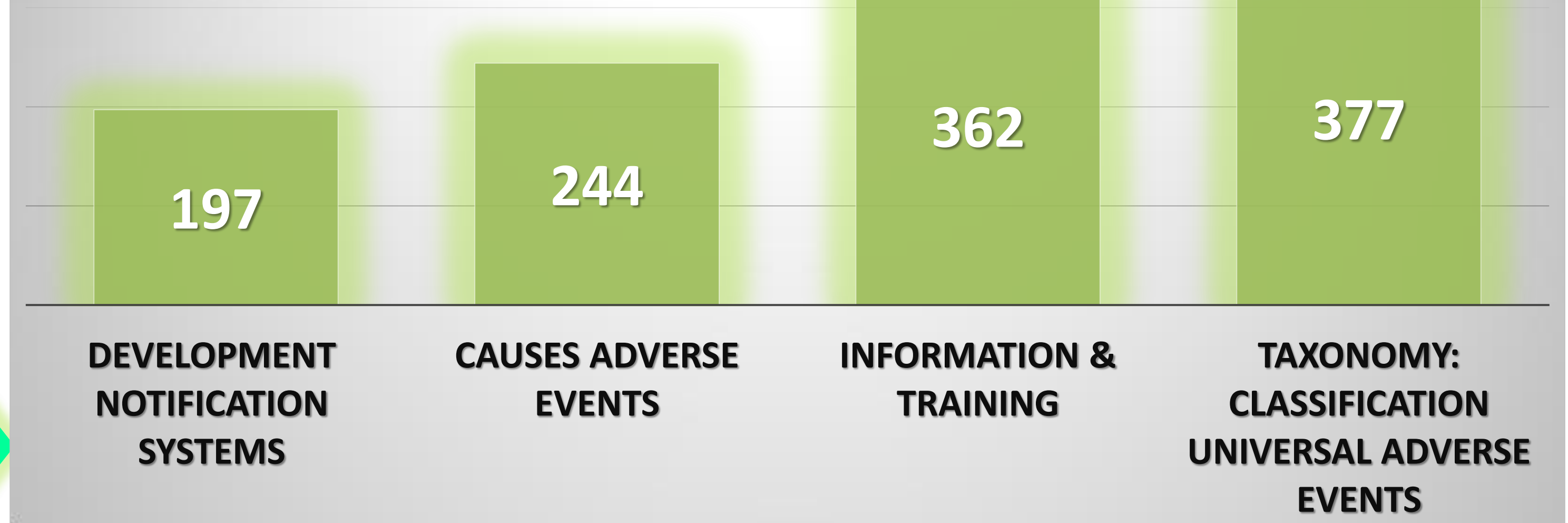
Conceptual Framework

Qualitative Case Study

Semi Structured Interview

Total Results

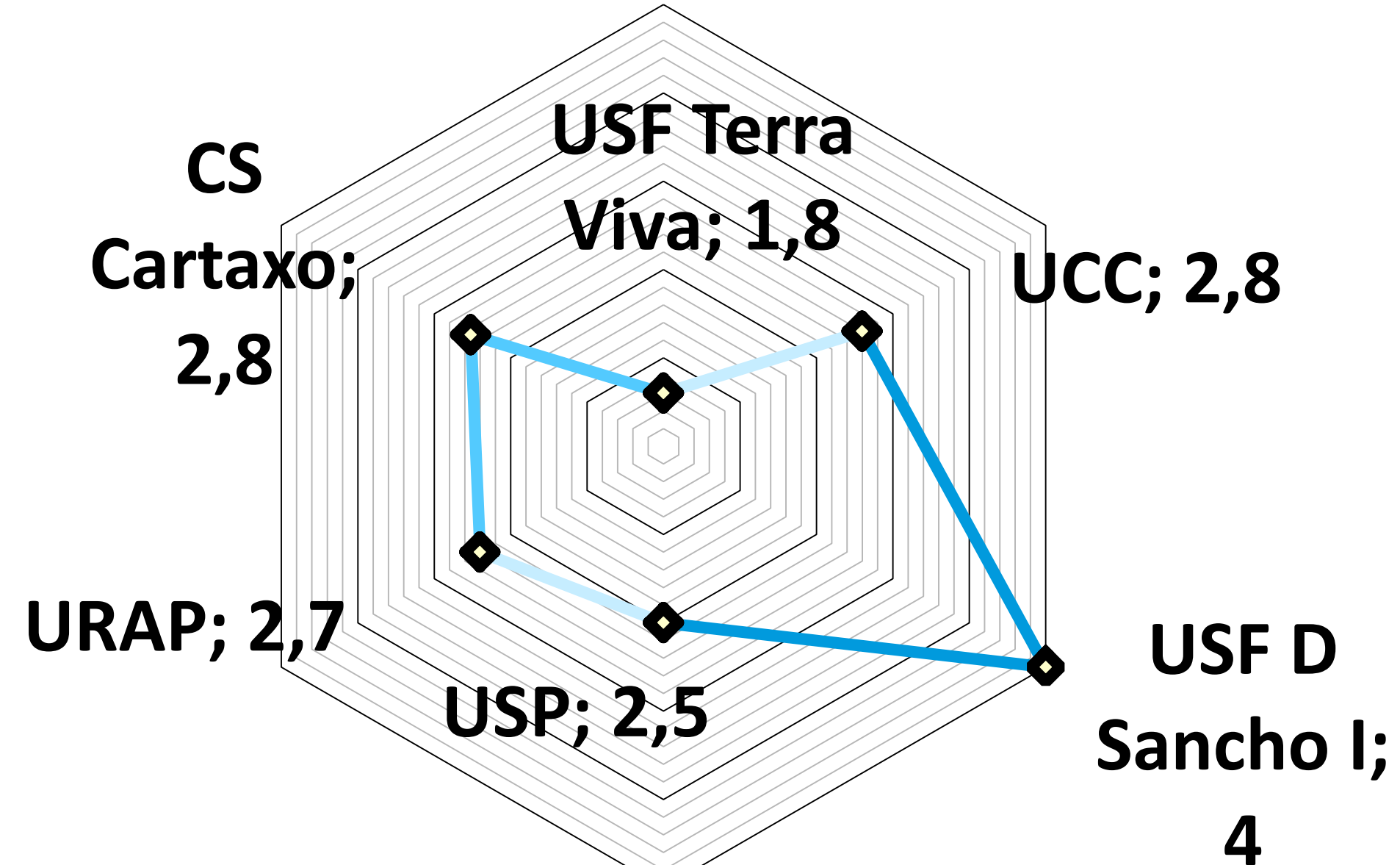
Results



Top 3 Adverse Events

	Health Center Cartaxo	Primary Care Context
Organization		Health Professional Conditions at Work
Patient versus Health System		Articulation from Services
Capacitation		Patient & Family Situation
	377	244

362 Patient Safety Culture



197 Notification Adverse Events

- 3** → **Residence**: Injectable minced; professional fall; bad technique
- 5** → **Health Unit**: Vaccination made trainee; vaccines temperature & packaging; lacking cleanliness; wrong contact record, Psychiatric illness verbal aggression

Results

What the PS know and consequently incorporate SD is little, it is carried out informally, not systematic, there is not enough information / training, much less routine routine of SD. Discrepancies in knowledge highlight crucial training vs information. The Cartaxo Health Center challenges are educational, structural and physical.

Who integrates SD health care training (base / postgraduate, service) or Health Accreditation

The knowledge about nature/impact and of adverse events is scarce (greater local reality than Primary Care)

The Safety & Notification are not uniform, and used mainly in accredited units.

The Safety Cultural is non-uniform in Functional Units (do not know differences). Is more difficult to notify about vaccines at home. It is very important home context, family, informal caregivers.