PATIENT SAFETY ISSUES AND CONCERNS IN BHUTAN’S HEALTHCARE SYSTEM: A QUALITATIVE STUDY

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ABSTRACT

**Background:** Patient safety has become a global imperative. In Bhutan, which is a resource poor nation, improving patient safety in hospital contexts is a challenge. Reasons for this include: a lack of information about patient safety concerns in Bhutan together with a lack of infrastructure to be able to identify and respond appropriately to key patient safety concerns from a Bhutanese perspective.

**Research questions:** The key research question guiding this study is as follows: What do key stakeholders perceive and experience as the main patient safety concerns in Bhutan’s healthcare system?

**Aims:** The primary aims of this study were twofold: first, to explore and describe what key stakeholders (e.g., doctors, nurses, educators, managers, administrators, policy makers) perceived and experienced as the main patients safety concerns in Bhutan’s healthcare system and related services; and two, aligned with the World Health Organisation’s global patient safety agenda for developing nations, to improve understanding of patient safety concerns in Bhutan and to use this understanding to inform recommendations for the development of appropriate locally adapted solutions to the concerns identified.

**Methods:** The study was undertaken as a qualitative exploratory descriptive (QED) research inquiry. Using a criterion-based stratified purposive sample of 94 participants, data were collected via in-depth individual interviews, nominal group meetings and policy document review. Data were subsequently analysed using content and thematic analysis strategies.

**Findings:** Analysis of the data revealed that the minimum standards and guidelines available in Bhutan’s hospitals primarily had as their focus quality assurance, not patient safety. Despite this focus, most participants understood patient safety as encompassing ‘doing no harm or reducing the risk of harm or injuries to patients when receiving healthcare’, not just assuring quality care. Medication errors, healthcare associated infections, diagnostic errors, surgical errors and post-operative complications, laboratory/blood testing errors, falls, patient identification and
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communication errors, were perceived as common patient safety concerns. The human (staff) factors (notably, a lack of knowledge, skills and ‘right attitudes’ pertaining to patient safety): system factors (which encompassed a lack of effective clinical governance, financial resources, and poor hospital design), and the influence of indigenous cultural variables were identified as contributing factors to these concerns. Instituting clinical governance, the development and/or improvement of physical infrastructure, providing adequate human resources, providing staff with patient safety training and education, promoting communication and information systems, and integrating indigenous cultural values into patient safety practices were, in turn identified as processes and strategies critical to improving patient safety in the Bhutanese healthcare system.

Conclusion: The findings of the study suggest that despite patient safety having received relatively little attention in the cultural context of Bhutan, the concerns described by participants were commensurate with those identified in other low-income and middle-income countries. In order to redress these concerns the findings of this study suggest that a ‘culturally adaptive’ ‘Bhutanised’ approach needs to be taken. This is because the conventional methods of patient safety used in high-income countries cannot always be successfully applied unless they are locally derived and adapted to take into account local needs, understandings, practices, affordability and resources.
Aims and objectives of the study

AIMS AND OBJECTIVES OF THE STUDY

A key aim of this study is to improve understanding of patient safety concerns in Bhutan and, aligned with the World Health Organisation global patient safety agenda for developing nations, inform recommendations for the development of appropriate locally adapted solutions to the concerns identified.

The related aims of the study were to explore and describe:

1. What patient safety policies and guidelines have been developed and operationalised in the Royal Kingdom of Bhutan;
2. What health service providers and managers know, understand and perceive to be the key patient safety issues and concerns in Bhutan’s national, regional and district hospitals;
3. What factors health service providers and managers perceive to have contributed most to patient safety concerns in Bhutan’s national, regional and district hospitals;
4. The strategies that participants believe are most needed to address the patient safety issues and concerns they have identified.