

# Family Involvement in Patient Safety

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## KEY QUESTION:

What are family members' perceptions and experiences of involvement with patient safety in non-residential acute health care settings? A systematic review protocol

## BACKGROUND:

There is emerging evidence suggesting that family members and close friends can—and do—contribute to protecting their adult relatives/friends from preventable medical errors and adverse events in non-residential acute health care settings, such as hospitals. This contribution may include detecting and preventing adverse events (2,4), acting as a “case manager” and advocating for the patient (Lindhardt, Bolmsjö, & Hallberg, 2006) and monitoring the patient's general medical care and condition (1). However, a systematic review investigating how family members perceive and experience their contribution to patient safety is yet to be undertaken.

## SYSTEMATIC REVIEW METHOD

### Type of studies:

- Qualitative studies only.

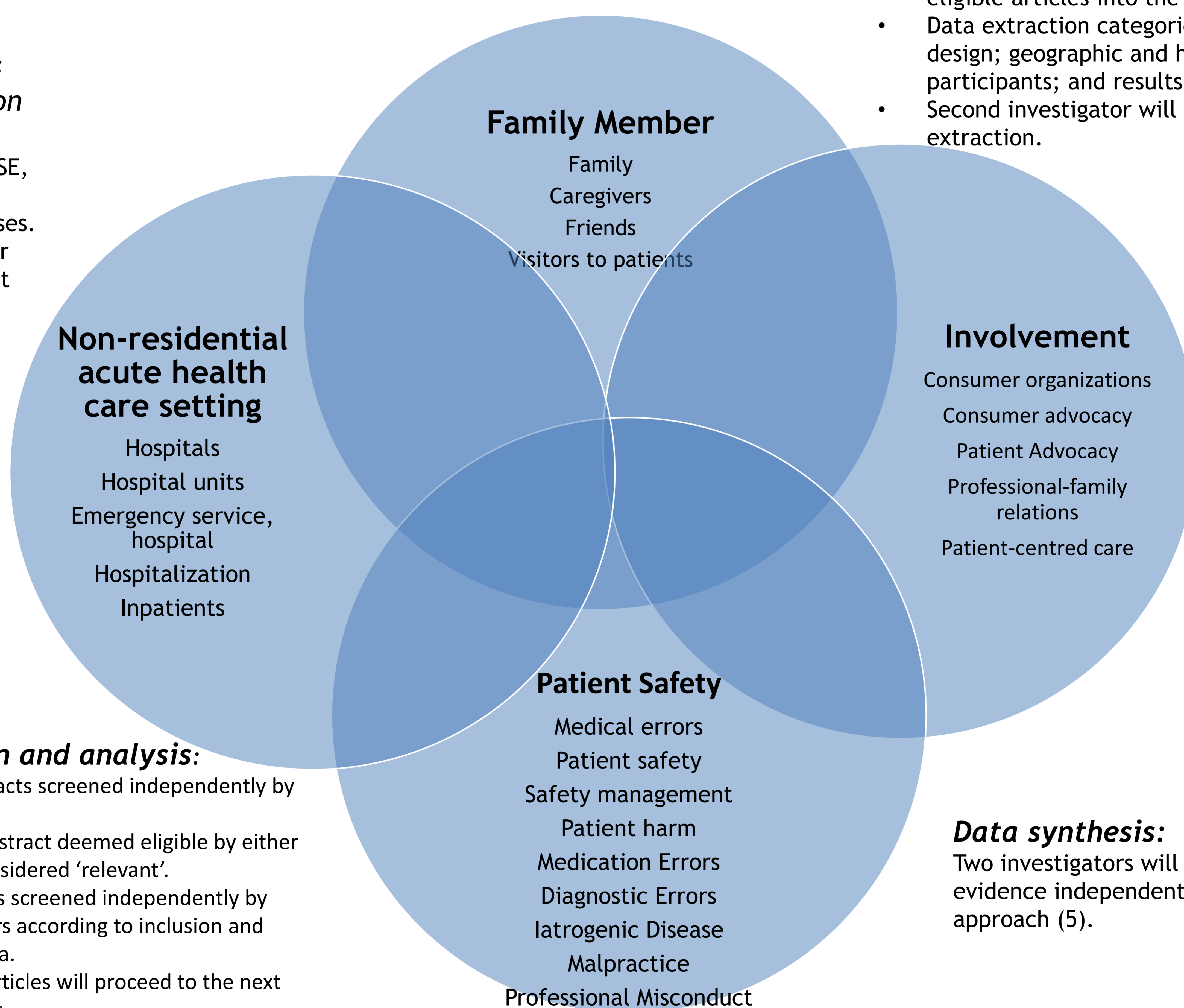
### Search methods for identification of studies:

- Medline, EMBASE, PubMed and CinAHL databases.
- See Figure 1 for specific Subject headings.

### Data collection and analysis:

- Titles and abstracts screened independently by two reviewers
- Any title and abstract deemed eligible by either investigator considered 'relevant'.
- Relevant articles screened independently by two investigators according to inclusion and exclusion criteria.
- Only 'eligible' articles will proceed to the next stage of analysis.

Figure 1: Medline subject headings



### Data extraction:

- One investigator will extract relevant data from eligible articles into the data extraction template
- Data extraction categories will include: study design; geographic and health care setting; participants; and results.
- Second investigator will check accuracy of data extraction.

### Assessment of risk of bias in included studies:

The certainty of the findings from the review will be assessed using the CerQual (certainty of the qualitative evidence) approach (Glenton, Colvin, Swartz, et al., 2013).

### Data synthesis:

Two investigators will analyse and synthesise the evidence independently using a *thematic synthesis* approach (5).

## RATIONALE:

Despite Australian policymakers advocating participation of patients and family members in patient safety (Australian Commission on Safety and Quality in Health Care, 2011), there is limited guidance for health care professionals to encourage this participation. Understanding family members' perspectives and experiences in relation to patient safety during their relatives' hospitalisation is important for informing policy and designing appropriate strategies to maximise their involvement. This systematic review will contribute to the body of knowledge required to produce such guidance.

## CONCLUSION:

This protocol outlines the proposed approach for undertaking a systematic review of family member involvement in patient safety in acute, non-residential health care settings. It is anticipated the findings will contribute important knowledge to our understanding of the role that family members play in reducing the incidence of adverse events in the hospital setting.

### References:

1. Auslander, G. K. (2011). Family caregivers of hospitalized adults in Israel: a point-prevalence survey and exploration of tasks and motives. *Research in Nursing & Health*, 34(3), 204-217. doi: 10.1002/nur.20430 2. Manias, E. (2013). Communication relating to family members' involvement and understandings about patients' medication management in hospital. *Health Expectations*, doi: 10.1111/hex.12057 3. Morse, J. M., & Richards, L. (2002). *REAME first for a user's guide to qualitative methods*. Thousand Oaks, Calif: Sage. 4. Parnes, B., Fernald, D., Quintela, J., Araya-Guerra, R., Westfall, J., Harris, D., & Pace, W. (2007). Stopping the error cascade: a report on ameliorators from the ASIPS collaborative. *Quality and Safety in Health Care*, 16, 12-16. 5. Thomas, J., & Harden, A. (2008). Methods for the thematic synthesis of qualitative research in systematic reviews. [Research Support, Non-U.S. Gov't]. *BMC Med Res Methodol*, 8, 45. doi: 10.1186/1471-2288-8-45.