HAZARD FREE HOSPITALS OF THE ARMED FORCES

Dear Editor,

One novel way to avoid hazards in a hospital is to avoid keeping records. This is the conclusion of a recent study conducted at AMC Centre and School.

A questionnaire was prepared listing all anticipated hazards that may take place in a hospital and was circulated amongst about 50 service hospitals. Only 30 hospitals responded.

There were 13 parameters like explosion, fire, radiation, electric hazards, drug or blood reaction, ecological hazards, dispensing wrong drug or a wrong dosage, mistaken identity of patients, faulty surgery, faulty anaesthesia, falling from beds, and so on. It is apparent that many of the above hazards are common though avoidable. The survey showed that only 6 hospitals had any hazards. Interestingly all the service hospitals had such an impeccable record that they have never faced common hazards like dispensing of wrong drugs or dosages and committing surgical and anaesthetic errors. The result appear to be too good to be true.

An American study showed that an average occurrence of 1 hazard per day may be expected in a general hospital with 400 beds. Thus there may be at least 1.5 hazardous occurrences per day in any Command Hospital. It works out to be about 1500 incidents in one year and about 4500 incidents in 3 years in one hospital alone. This needs to be weighed against the reported average of 23 incidents in 3 years from 30 Armed Forces hospitals.

It has been estimated that 66 per cent of all the occurrences are due to patient errors, 16 per cent due to medical staff errors, 14 per cent due to patient and staff errors and 4 per cent due to non-specific reasons [1]. Patients are generally passive, stressed, and relatively weak and dependent. It is not uncommon for patients to fall from beds and wheel chairs, to slip and injure while walking and to strike against objects. This is more so in respect of psychiatric and geriatric patients. It is also not very rare for the

patients to succumb to the effects of explosion, building collapse, radiation, fire and electric leakage. The staff errors may be due to overcrowding, callousness, ignorance, stress, poor infrastructure and resources.

Hospital hazards may have far reaching ramifications. The patients may feel unsafe and insecure. The hazards may lead patients to have complications, prolonged hospitalization, disability and death. Even the staff and visitors may feel apprehensive and uncertain. They may also become victims of avoidable hazards leading to hospitalization, disability and death. Sinking morale of the staff may give rise to low quality service. This will be a clear definition of a hospital with poor image. Hospital expenses will soar due to damaged infrastructure, wasted resources, and damage claims by patients and staff.

Our survey brought out certain vital facts:

- No hospital of the Armed Forces has a comprehensive system of recording of hazards.
- A few hospitals have a sketchy system of recording a limited number of hazards.
- There is a wide-spread lack of awareness about the importance of recording hazards and instituting preventive measures.
- There are many areas where safety standards need to be defined.
- Existing safety standards are not strictly followed.

Let us save the patients from their diseases and make hospitals secure places for them to stay in.

Lt Col TOMMY VARGHESE

Training Officer
AMC Centre and School
Lucknow 226002

REFERENCE

1. Fraser I. Safety in hospitals; Back ground papers. New Delhi: National Institute of Health and Family Welfare, 1985; 4.