



Obstacles in error reporting system among radiotherapy facilities: Basis for an enhanced ILS policy



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Background and Objective

Identify the major obstacles in error reporting and the level of communication of radiotherapy personnel among radiotherapy facilities to promote a better treatment error reporting and to enhanced the incident learning system policy of the department.

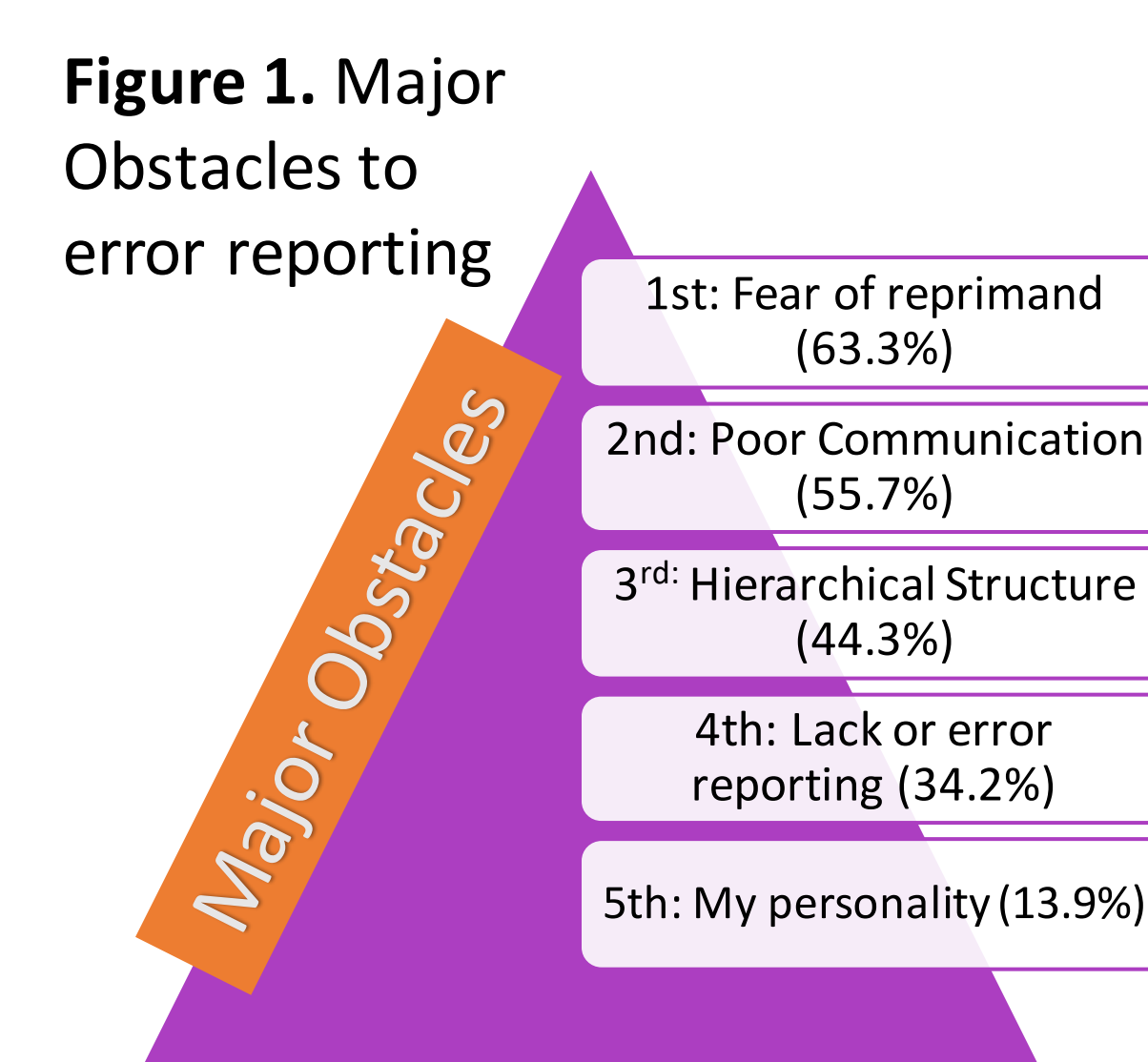
Methods

This study conducted a survey on 79 radiotherapy personnel that includes the radiation oncologists, medical physicists, radiation therapy technologists, oncology nurses, and administrative staff from selected hospitals with radiotherapy facility. The survey focus on obstacles in error reporting and overall communication of personnel.

Results and Discussion

Radiotherapy personnel were involved in the study from selected hospitals in Metro Manila, Philippines completed the surveys. Data were summarized using descriptive statistics, to determine the level of communication among radiotherapy personnel in terms of personal and interdisciplinary Weighted Mean was used. Further, Cramer's V was used to determine the level of association between the demographic profile in terms of profession, years of service, and level of education and level of communication of the radiotherapy personnel in terms of personal and interdisciplinary, and the major obstacles to error reporting.

Major obstacles encountered in reporting errors identified by 79 radiotherapy personnel according to their profession, years in service and level of education. Fear of reprimand has a frequency of 50 with a percentage of 63.3%. Poor communication with a frequency of 44 an has a percentage of 55.7%. Hierarchical structure with a frequency of 35 and a percentage of 44.3%. Lack of error reporting has a frequency of 27 with a percentage of 34.2%. My personality has a frequency of 11 with a percentage of 13.9%.



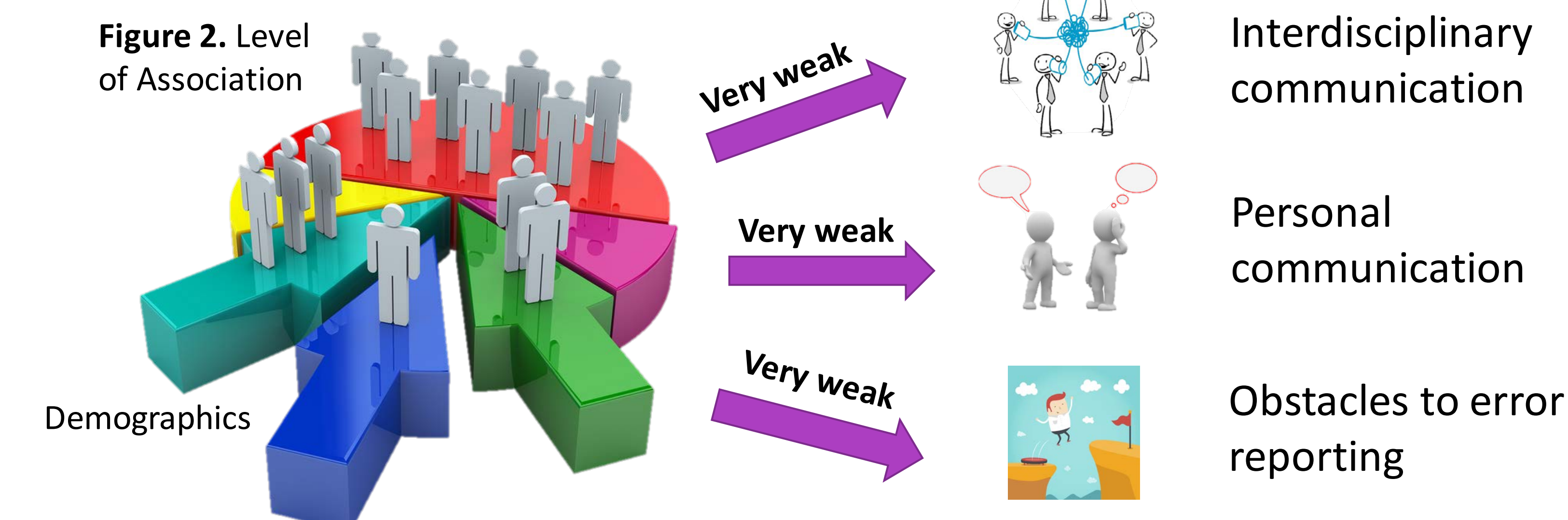
Oncology nurses perceived the interdisciplinary communications as excellent, with mean rating of 4.61 while other personnel gave a mean rating ranging from 4.28 to 4.45. Radiation oncologists, medical physicists, oncology nurses, and administrative staff have excellent personal communication with a mean rating ranging from 4.50 to 4.63, while radiation therapy technologists gave a good personal communication with a mean rating of 4.42.

Table 1. Summary of responses in the interdisciplinary and personal communication

	Interdisciplinary		Personal	
	Mean Response (Verbal Interpretation)	Cramer's V	Mean Response	Cramer's V
Profession:		0.122		0.147
Rad Oncologists	4.40 (A)	Very weak association	4.50 (SA)	Very weak association
Medical Physicists	4.45 (A)		4.63 (SA)	
Radiation Therapy Tech	4.28 (A)		4.42 (A)	
Oncology Nurses	4.61 (SA)		4.57 (SA)	
Administrative Staff	4.41 (A)		4.51 (SA)	
Years of Experience		0.112		0.167
30 and above	4.31 (A)	Very weak association	4.39 (A)	Weak association
21 to 29	4.31 (A)		4.08 (A)	
11 to 20	4.37 (A)		4.47 (A)	
6 to 10	4.54 (SA)		4.73 (SA)	
0 to 5	4.36 (A)		4.48 (A)	
Educational Attainment		0.105		0.131
Doctoral	4.40 (A)	Very weak association	4.50 (SA)	Very weak association
Graduate Studies	4.56 (SA)		4.63 (SA)	
College	4.35 (A)		4.46 (A)	

Scale used: 1 – Strongly Disagree (SD), 2 – Disagree (D), 3 – Neutral (N), 4 – Agree (A), 5 – Strongly Agree (SA)

The demographics showed a very weak relationship with the interdisciplinary and personal communication of personnel and the major obstacles in reporting errors.



Conclusions

- Radiotherapy personnel identified that fear of reprimand, poor communication, hierarchical structure, lack of error reporting system and my personality are the major obstacles to error reporting.
- Majority of the radiotherapy personnel have good to excellent interdisciplinary and personal communication.
- The relationship between the demographic profile and the level of communication and the major obstacles in error reporting showed very weak association.

References

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