

## ASSESSMENT OF PATIENT SAFETY ATTITUDES AMONG RESPIRATORY THERAPISTS

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# Background

Data reporting patient safety attitudes of respiratory therapists (RT) in the United States is limited. Positive patient safety attitudes have been associated with improved outcome measures such as employee retention, reduced medication errors, and decreased length of stay. This study reported patient safety attitudes of RTs to determine which attributes correlated with a greater safety score.

## Methods

A non-experimental, crosssectional study design using a SAQ questionnaire was employed. To be included in this IRB approved study, participants were required to be a RT in VA and a member of the AARC. Primary recruitment was through AARConnect with a link to the electronic survey. Variables were dichotomized by categorizing the attributes of having 10 or more years of experience, being 40 years old or older, having a BSRT or MSRT degree, having a baccalaureate or graduate degree in any field, obtaining a specialty credential, or earning the RRT credential and relating these to the SAQ score. A multiple regression model was deployed to determine which attributes lead to a more positive patient safety score. An Alpha level was set to p < .05.

### Results

145 participants completed the survey resulting in a 13% response rate. The SAQ exhibited high internal consistency with Cronbach's alpha of 0.93. The primary outcome was comparison of SAQ scores and the 6 study attributes. ANOVA indicated the predictors accounted for a significant proportion of the variance regarding patient safety attitude (F(8, 135) = 2.506, p =.014); R<sup>2</sup> was .129, representing almost 13% of variance for the SAQ scores. Obtaining a specialty credential was the only significant predictor; there is a nearly a 5point higher safety score for those who have a specialty credential compared to those who do not have a specialty credential.

### Conclusions

There is a significant difference in patient safety attitudes of RTs who have obtained a specialty credential. These results are similar to data reported from the nursing literature on the benefits of obtaining a specialty credential. Further research should be conducted to determine the importance of earning a specialty credential, earning a BSRT, and obtaining the RRT credential. Investigation into these attributes on a national level could help to provide evidence-based recommendation for education and credentials.





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