2010 The Year of Perioperative Safety
Safety is Everybody's Job in a High Reliability System

2010 Periop Safety Goals
To have no Serious Safety Events occur
To have open, and valient communication amongst the Perioperative TEAM
At each point of patient handoff, pertinent and up to date information is reviewed amongst care givers.
Consistent use of Perioperative safety tools such as the safety checklist, policies, safety rounds and safety audits
Definitions of all points of patient care are limited
Attention and focus of our work is directed toward the patient
All regulatory expectations are met consistently
Breaks, SCIP and IH expectations are met consistently
Share safety incidents with Perioperative Services members to improve care, increase awareness and educate

Preoperative Checklist

On October 30, 1935 at Wright Air Field in Dayton, Ohio the first test flight of Boeing's Model 399 resulted in a fiery crash...
The crash was blamed on the Army Air Corps' best test pilot Major Ployer P. Hill...
This plane was decidedly more complex than previous aircraft...
It was said that this plane was "too much airplane for one man to fly"...

Preoperative Checklist

Insiders and other test pilots felt that the plane was flyable...
They came up with a clever and simple idea...
They created a pilot's checklist...
They felt that aeronautics had become so complex that they could no longer rely on just the memory and experience of the pilot, however much an expert.

Preoperative Checklist

The rest as they say is history. U.S. history that is...
The checklist allowed for many successful and safe test flights. Model 399 became the B-17 "Flying Fortress"
Army purchased almost 13,000 B-17s...
The B-17 gave the Allies a decided advantage over the skies of Europe and its bombing campaign had devastating effects across Nazi Germany...
Of course, checklists have been around for a long time... Could this be a grocery list from ancient Egypt?

Our checklist was initially conceived because of our need to improve our SCIP numbers and to drive up perioperative safety...

It went along with our desire to "hardwire" some orders and to make sure they were carried out...

The work of the WHO and their landmark study in the NEJM also drove the issue...

The media and public opinion also played a role...

We formed our checklist by taking the best components of:

WHO and Gunderson Lutheran

Please refer to your handout for the details of the current Spectrum Health Preoperative Checklist...

This list is being constantly evaluated and improvements are being made...

Like in the B-17 example, medicine and nursing as a whole, particularly those involved in the field of surgery, have had to develop the ability to manage extreme complexity.

Can this complexity be mastered? Yes.

Checklists are not the total answer to the question but they can certainly help with the execution and the process of SAFETY.

We need to overcome faulty memories and distraction...

Checklists "install a kind of discipline of higher performance" and provide a kind of cognitive net," says Atul Gawande in his book "The Checklist Manifesto: How To Get Things Right", 2009

**PREOPERATIVE CHECKLIST EQUALS PERIOPERATIVE SAFETY**

We looked at and assessed the value of some existing published checklists from other institutions...

- The SCOAP List: The Foundation for Health Care Quality
- Regions Hospital
- United Health Services Hospital
- Children's Hospital of Boston
- Mayo Clinic
- Gunderson Lutheran
- World Health Organization

- We also reviewed multiple videos of checklists in action.

The list consists of 3 Phases

- At sign in...Before induction of anesthesia
- Time out...Before skin incision
- Sign out...Before patient leaves the OR
### Preoperative Checklist:

**Preoperative Checklist: Next Steps**

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<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>All process or checklist changes deemed necessary by the recent feedback will be implemented on 2-1-10. Another “Go Live” date...</td>
<td></td>
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<tr>
<td>Staff communication regarding changes in expectations will be done in advance.</td>
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<tr>
<td>With next “Go Live” we will have mandatory return of all checklists...</td>
<td></td>
</tr>
<tr>
<td>Each checklist will have a patient sticker or be pre-printed with patient name. Feedback is still optional.</td>
<td></td>
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<tr>
<td>We will begin to collect specific data regarding the level of team engagement in the process.</td>
<td></td>
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<tr>
<td>Again we will continue to collect any feedback from staff and report back to them.</td>
<td></td>
</tr>
<tr>
<td>We are planning a 120 day review of the process...</td>
<td></td>
</tr>
<tr>
<td>Additional changes will be made as feedback and data warrants.</td>
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</tbody>
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### Preoperative Checklist:

**Preoperative Checklist:**

The "Surgical Safety Checklist" as it is now known went "Live" Dec. 1, 2009...

Prior of going "live" it first underwent 6 wks of trials and adjustments to both document and process using both nursing and medical staff feedback...

"Go Live" consisted of mandatory use of the checklist and optional return of the physical list that highlighted issues both positive and negative as well as suggestions for improvement.

Large laminated versions (11x22 in) are now posted in all SH ORs as a visual reminder and guide for its use...

### Preoperative Checklist:

**Preoperative Checklist:**

We began with several checklist "pilot trials" performed by surgeons and anesthesiologists...

This led to a refinement of our checklist...

More importantly it introduced the concept of the checklist to the OR staff and led to discussions amongst surgeons and anesthesiologists...

### Preoperative Checklist:

**Preoperative Checklist:**

The checklists that are returned are collected and logged into a database.

Comments are categorized and monitored for systemic problems...

Daily rounding by nursing leadership is also underway... This provides us with a chance to observe the checklist process and provide teaching and guidance...

Feedback related to undesirable behavior or pushback about the checklist is referred to the appropriate leadership: Nursing, Surgery, or Anesthesia... Many one-on-one discussions have taken place...

All feedback and usage statistics are published bi-monthly to all Peri-op Staff...

The Peri-op Staff is responding well to the published data as they see the results of their engagement in the process...

### Preoperative Checklist:

**Preoperative Checklist:**

Unintended consequence of Checklist?

Supply Chain recently raised a concern about the spike in volume of returned items from the OR starting in November and increasing in December...

This coincided with the implementation of Checklist trials... Our feedback from staff included a disproportionate amount of comments about how to do the case in a more cost effective way...

We will monitor to see if this trend continues...
Preoperative Checklist

Progress? Herding cats...
Good acceptance among periop nursing staff...
Slower going but gaining momentum among surgical and anesthesia staff...
It will take persistence, more education, and continual communication to get full cooperation...
Even a year into the program, we are still a work in progress....refinements continue...