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Quiet in the Operating Room! Team STEPPS and OR Distractions

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Background and Objective

From the moment that a patient enters the operating room to the time that they are brought to the post anesthesia care unit, a distraction has the potential to lead to an adverse outcome for the patient. During the critical portions of the surgery, it is even more important for all members of the operating staff to be focused and engaging in safe practices. Distractions in the operating room can hinder safe communication and potentially endanger patient safety. Team training has been shown to both improve team communication and reduce distractions.

The objective of this project was using Team STEPPS training to reduce distractions during the critical portions of surgery, defined as the time of anesthesia induction, the time out, and the time of emergence from anesthesia.

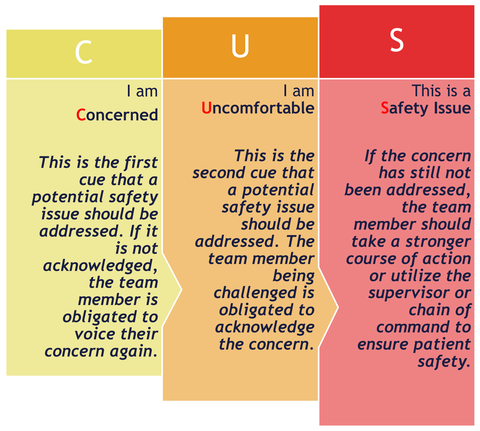
Team STEPPS Training

Team STEPPS training aims to provide healthcare professionals with a common language to address safety concerns and a framework with which to escalate action in order to prevent a safety issue from turning into an adverse outcome.

Communication tools help staff distinguish between and triage useful communication and unnecessary distractions.

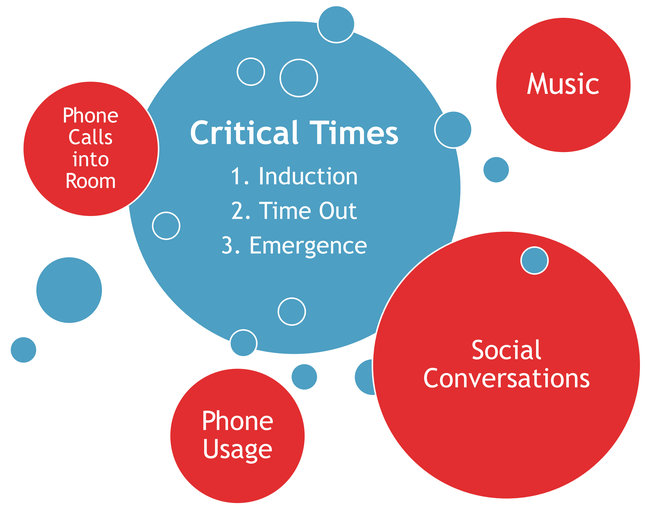
There are two focus tools that healthcare professionals can use to alert the team that a potential safety issue should be addressed, in other words "stop the line."

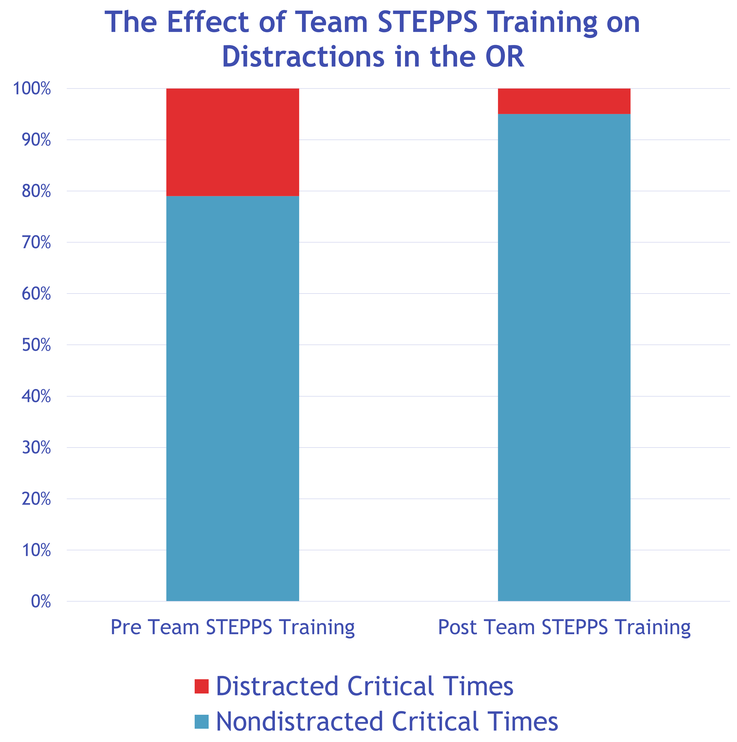
CUS Rule/Reminder Tool



Two Challenge Rule/Reminder Tool

Distractions in the Operating Room





Project Implementation

Assemble the team

- An initial meeting was held to review the process and design the improvement plan . The team included:
  - Director of Peri-Op, Nurse Manager, CRNA
  - Members of the Performance Improvement Departmeht
  - Vice Chairmen of Anesthesia and Surgery

Collect Baseline Data

- Medical Students performed covert observations over a 3 week period to count interruptions by phone calls/usage, music, and social conversations during critical times in the operating room: Induction, time out and emergence.

Team STEPPS Training

- 9 perioperative staff members participated in formalized Team STEPPS training, ranging from Master Training, half day training, or online modules.
- 27 staff members received focused education on the two focus tools: CUS and the two-challenge rule.

Follow-up Data Collection

- Nurse educators repeated covert observations over a 3 month period, documenting distractions during critical portsions of procedures

Discussion and Next Steps

Overall distractions during critical portions of the procedure are low, and were made even lower with the additional staff Team STEPPS training.The use of Team STEPPS training demonstrated a reduction in distractions during the defined critical portions of surgical procedures, from 21% of observed cases before training to only 5% of observed cases after training. The only distraction observed in this small sample of cases was “social communication,” both before and after Team STEPPS training.

Limitations of this project include the small number of observed cases and the limited timeframe of the study period. Future directions include the continued monitoring for distractions and utilization of CUS and Two challenge rule to measure the long term impact of Team STEPPS training.

Conclusions

Effective teamwork in the operating room depends not only on direct and targeted communication but freedom from distractions. This project suggests that training can be effectively implemented to improve patient safety by reducing the number of distractions during the critical portions of surgery, events identified to be times where every team member should be focused in order to prevent adverse outcomes for the patient.