THE COMPLIANCE OF SURGICAL SAFETY CHECKLIST AT WEST WING OPERATION THEATRE COMPLEX ,MAX HOSPITAL SAKET,NEW DELHI

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INTRODUCTION

- WHO surgical safety checklist is used worldwide in operation theatres for safety of patients.
- Max Super Specialty Hospital,Saket is using it religiously in Operation theatres for the last 6 years.
- It has been made mandatory in all procedures performed outside operating room where anesthesia services are provided.

SIGNIFICANCE OF A SAFETY CHECKLIST

⇒ Reinforces accepted safety practices

⇒ Fosters better communication and teamwork between clinical disciplines.

⇒ Improves the safety of operations

⇒ Avoids inadequate anesthetic safety practices

⇒ Reduces avoidable surgical infection

⇒ Reduces unnecessary surgical deaths and complications

AIMS AND OBJECTIVES

* To check the compliance of WHO surgical safety checklist in the West wing operation theatre complex of Max Hospital , Saket.
* To analyze its compliance in the various surgical departments of the West wing operation Theatre complex.
* To study the entire process flow of the patients inside the operation theatre.
* To search the areas of problem and find the reasons for the same
* To give recommendations for the further improvement in the surgical safety of patients.

METHODOLOGY

Type of study : Observational cross-sectional

Study population : Surgery patients, surgeons, anaesthetists, OT nurses, OT technicians

Study area : Operation theatre complex, Max Hospital, West wing, Saket, Delhi

Duration of Study :1 Month

Type of Data : Quantitative

Technique : Direct observation of the surgery patients, surgeons,anesthetists, OT nurses and technicians.

Tool :Checklist

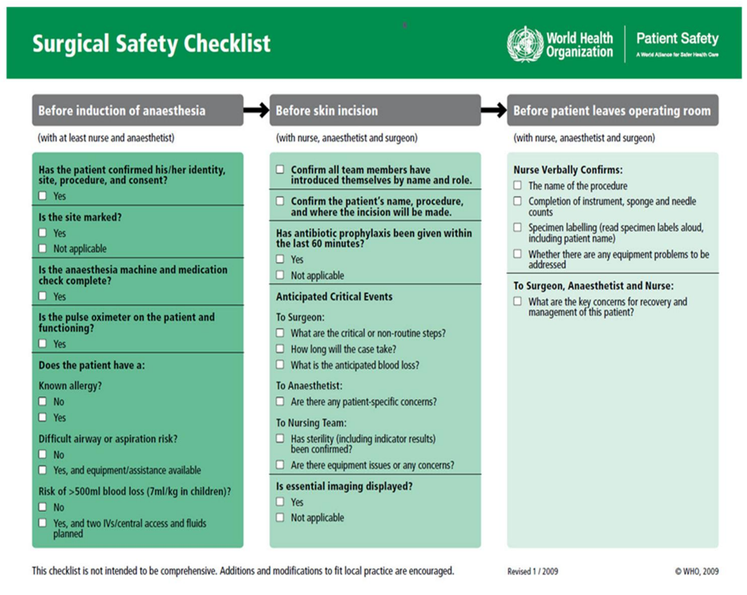
Sample size : **100 surgical** patients with surgeries under GA according to the convenience.

Sampling technique– convenience sampling

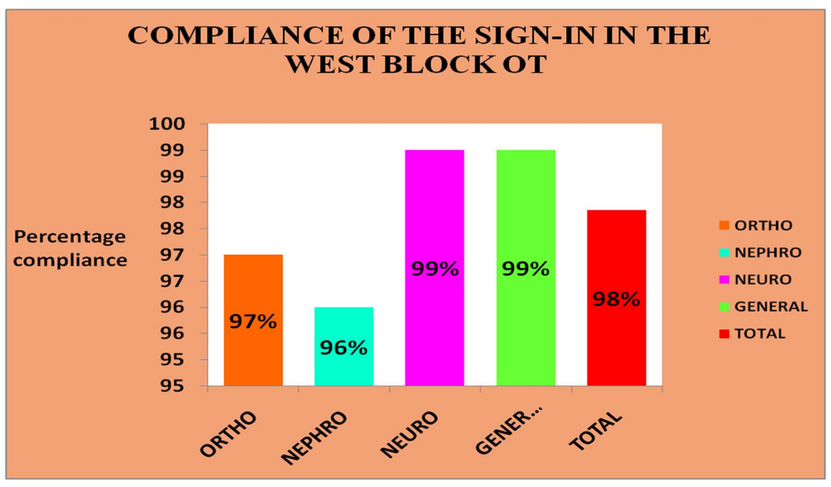
Inclusion criteria- All Patients in the operation theatre undergoing surgeries under GA, anaesthetists, surgeons, nurses in the West wing operation theatre.

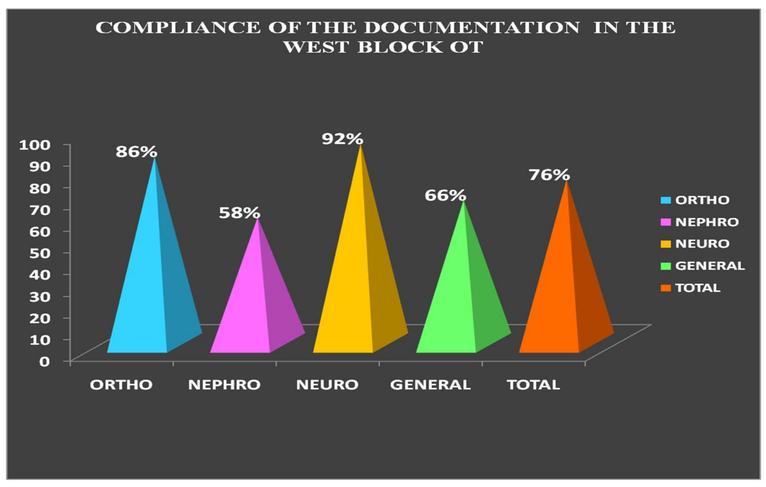
Data collection - Quantitative (1Month)

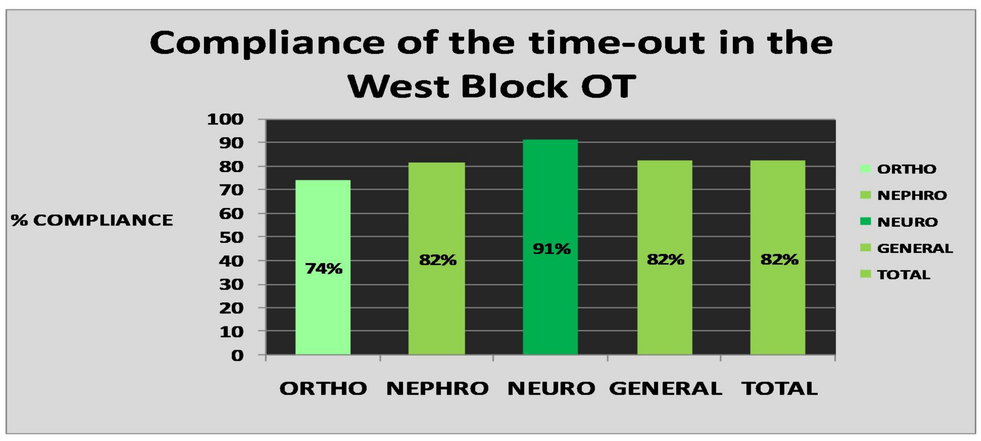
Data Analysis-The checklist was divided into four domains; **Sign in, Time out, Sign out and Documentation**. There were 16 elements under these 4 domains. Each element was given score 1 for the compliance and 0 for non compliance. The findings are represented with the help of bar graphs and pie charts.

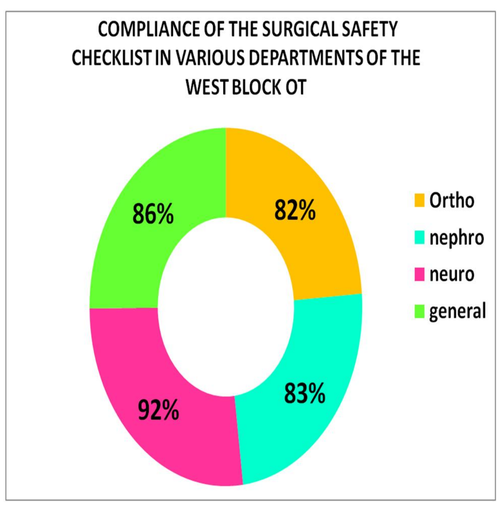


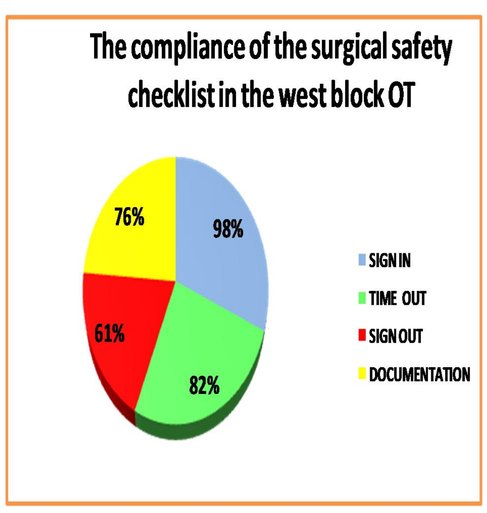
DATA ANALYSIS

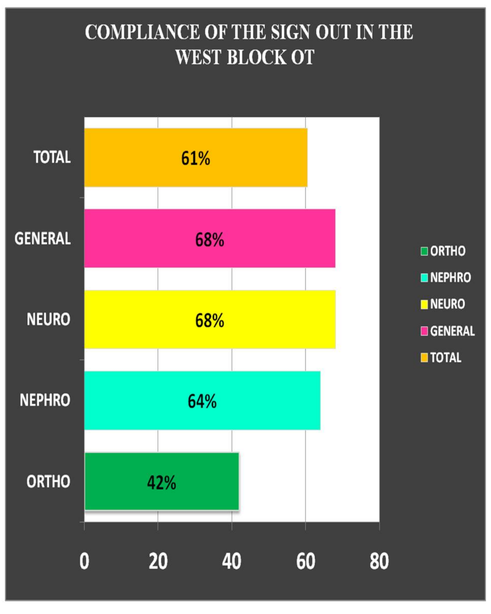


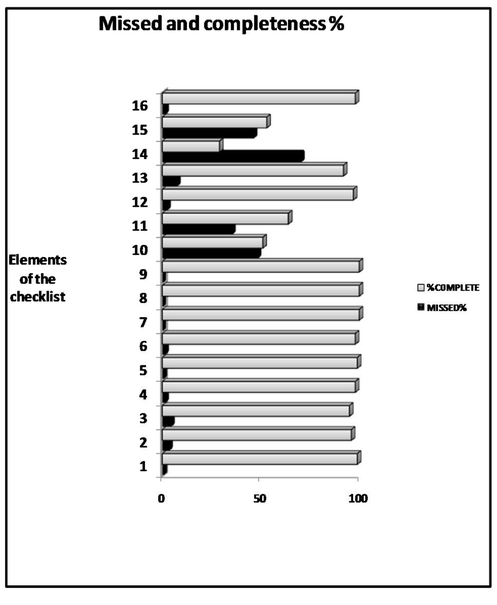


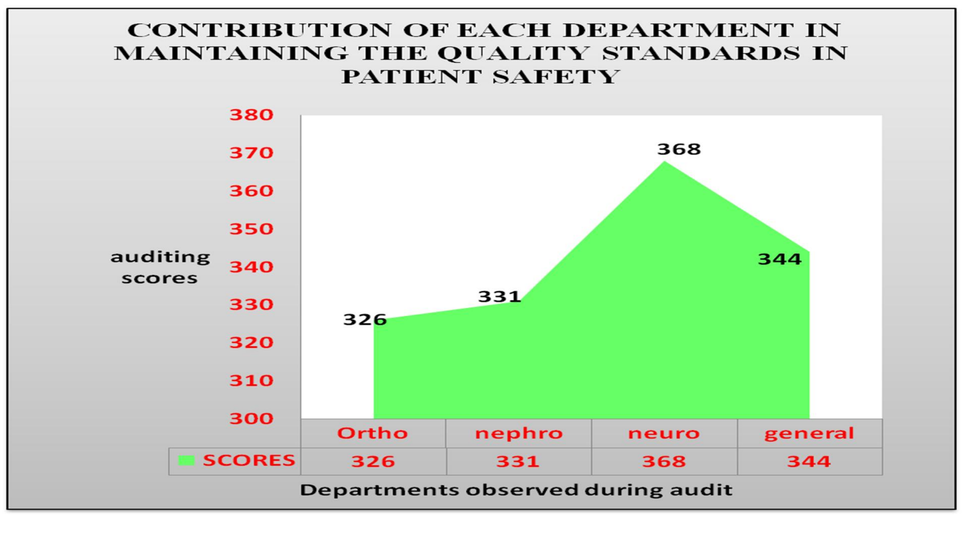












RESULTS

* **The compliance of the surgical safety checklist in the West wing operation theatre Complex, Max Hospital, Saket is 86%.**
* There are highly satisfactory results associated with the sign-in and the compliance is 98%
* The compliance of time-out, sign-out and documentation is 82%, 61%, 76% respectively.
* There are three elements of the checklist which have shown 100% compliance and the completeness.
* Element number 14; the key concerns for recovery and management of the patient is 29% compliant.
* The Department of Neurology has shown maximum contribution towards the safety measures of the patient in the OT and has obtained maximum score of 368 whereas ortho department has shown minimum contribution with a score of 326.This score was out of 400.

RECOMMENDATIONS

- Gap between knowledge and practice needs to be bridged. Greater awareness and education is required
- The surgeons, anesthetists , nurses and OT technicians should take it as seriously as they take surgeries. There should be training modules to encourage such attitude.
- There was a gap seen in the antibiotic prophylaxis given during the surgery. A proper monitoring is required in this area for the patient safety and better quality standards.
- Validated evidence based initiatives need to be strongly emphasized and published.
- The departments like ortho and general surgeries need more staff to maintain the standards of quality due to high work load.
- There should be a proper monitoring during the Time-Out and Sign-Out ,the recorded videos should be analyzed to check the important gaps which are usually missed during the audit.
- The OT is headed by the clinical staff ,an association of an OT manager inside the OT can bring significant changes to the current scenario.