

Study seeks to sharpen surgery systems

February 27 2015, by Joseph Carpini

Communication and coordination are important aspects of any workplace - but arguably more important in operating theatres than anywhere else, according to Professor Sharon Parker from The University of Western Australia's Business School.

A new multi-disciplinary study at UWA in collaboration with a major Perth hospital aims to improve patient outcomes in operating theatres by developing better channels of communication and teamwork among surgery team-members.

"While most operations are safe, a lot can go wrong in an operating theatre," said Associate Professor Stewart Flemming from UWA's School of Surgery. "For example, errors can occur in monitoring, medication, anaesthetic, in professional judgement and expertise and lastly in surgical technique. Incorrect diagnosis can lead to patients being given incorrect or delayed treatment."

Research has found that surgical procedures in Australia suffer from a 22 per cent 'adverse event rate'. While most of these events are minor and cause no permanent harm, 13 per cent of these events result in some form of permanent disability. In four per cent of cases errors may contribute to patients dying (less than one per cent of all operations) but these tend to be in more complex and dangerous cases.

Yet, disturbingly, almost half (48 per cent) of these 'adverse events' are preventable and as many as 70 per cent are due to communication failures.

This study brings together UWA's Business School, School of Surgery, School of Psychology and Centre for Safety and a local hospital.

Researchers will examine the usefulness of five-minute surgery-team briefings in which nurses, surgeons and anaesthetists meet before the start of every surgical list.

They will also investigate key interpersonal predictors of important outcomes such as near misses, minor complications, workflow and surgical efficiency. From his related six-month pilot study, Joseph Carpini a PhD candidate at the UWA Business School, observed that briefings were an effective means of not only reducing medical error, but also increasing operating theatre efficiency. The researchers hope the year-long, bigger study will confirm these findings.

Using in-theatre observations, interviews and questionnaires, the research brings together best practice in medicine and social sciences for practical applications not only in operating theatres but also in medical training and other high-risk action teams such as in mining and offshore drilling.

Provided by University of Western Australia

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