Lakeridge Health

OR/SPD Relations

Maureen Greer, Corporate Manager SPD

Renee McGuire, Patient Care Specialist
OR/PACU, Oshawa

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Objectives

- Overview of Lakeridge Health demographics, services and staffing
- To describe the need for better strategies for communication between OR and SPD to improve staff and patient needs and build relationships
- Describe strategies employed at Lakeridge Health to improve relationships, communication, partnerships, transparency and most importantly patient safety

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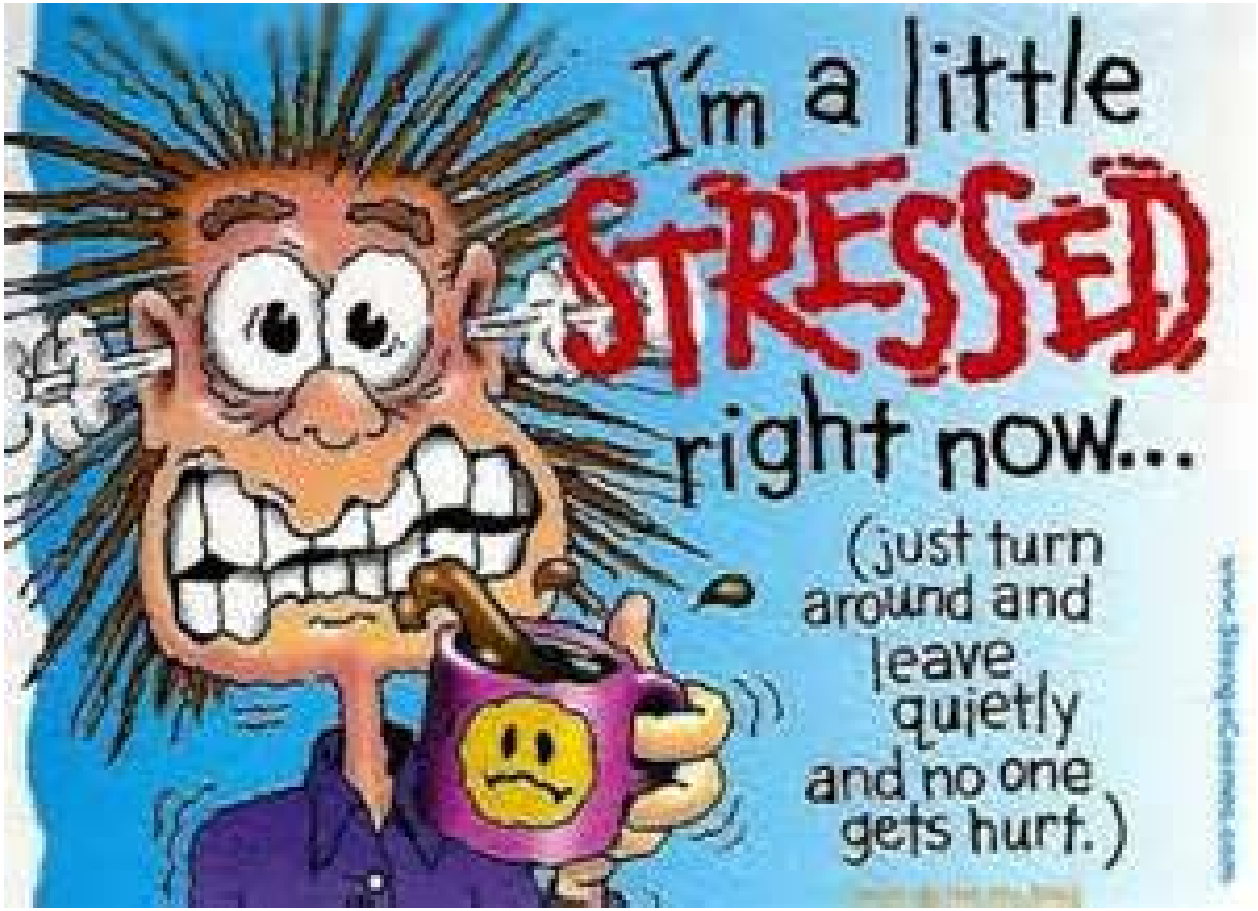
Is this a reality for you?



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Background

- Lakeridge Health is one of Ontario's largest community hospitals
- Serves people across Durham Region and beyond
- There are four hospital sites, three of which are acute care settings each with its own OR and SPD
- Lakeridge Health Oshawa operates 10 elective OR's Monday-Friday, with 24/7 coverage

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Background

- Lakeridge Health Bowmanville operates three elective OR's Monday-Friday, with 24/7 OR on-call coverage
- Lakeridge Health Port Perry operates one elective OR Monday-Friday, with 24/7 OR on-call
- Surgical services provided: thoracic, orthopedics, urology, gynecology, general, plastics, ENT, Oral, cystocopy and eyes

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Background

Combined we service

- 7,149 Inpatient surgeries/year
- 35,212 Outpatient surgeries/year
- 1,056 Cancer treatment surgeries/year
- 5,865 Eye Care surgeries/year

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Background

Staffing

- Oshawa: OR Nursing FT- 34, PT- 18, Support Staff- FT/PT-15, SPD FT-21, PT-15 (Corporate)
- Bowmanville: OR Nursing FT- 5, PT- 9, Support Staff- 5, SPD FT- 2, PT- 2
- Port Perry: OR Nursing FT- 4, PT- 4, Support Staff- 1, SPD FT- 1, PT- 1

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Driving Forces for Change

- High stress and increased sick time
- “Ripple Effect” causing unhealthy communication and blame from surgeon to nursing to SPD staff to management
- Increased errors
- High cost of repairs
- Patient risk and patient safety
- Patient cancellations

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Driving Forces for Change

- Hospital liabilities
- Decreased efficiencies and productivity
- Increased overtime
- Over budget
- Surgical instruments represents a major financial asset, as such this inventory must be properly cared for and maintained for optimal usage and patient safety

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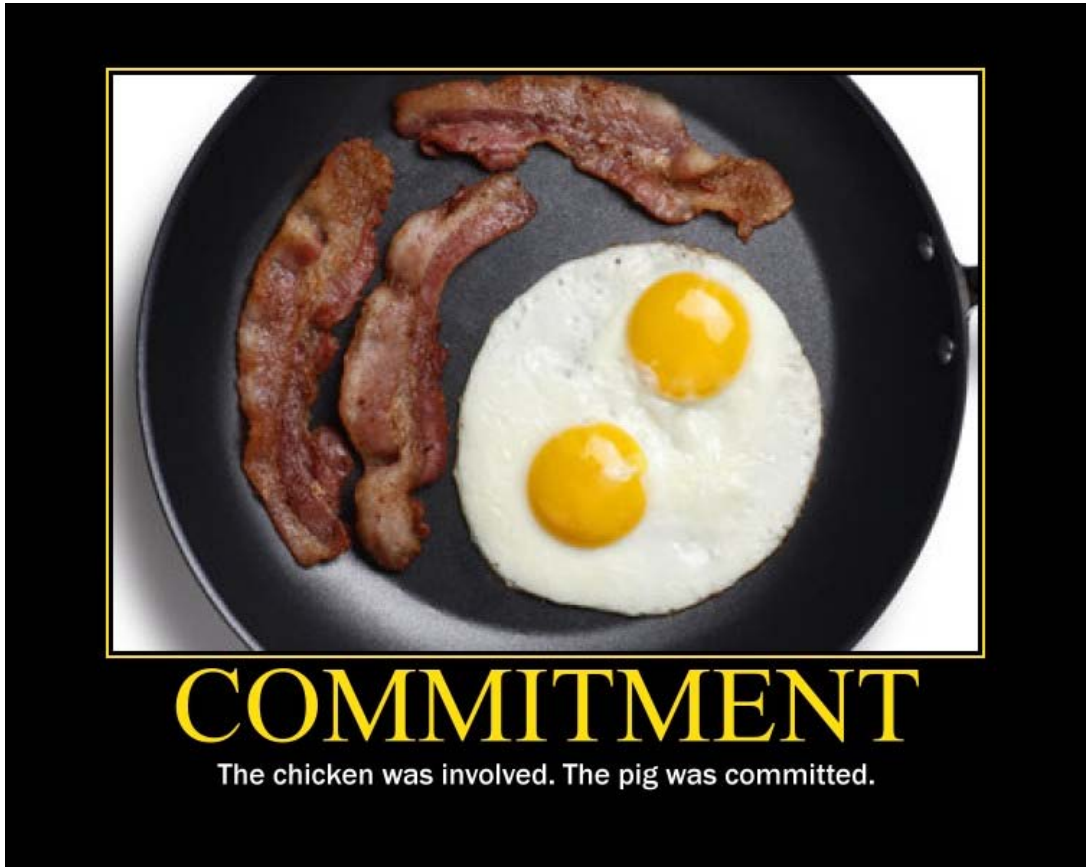
Strategies for Improvement

- Important to have commitment between OR and SPD leadership to manage processes set in place



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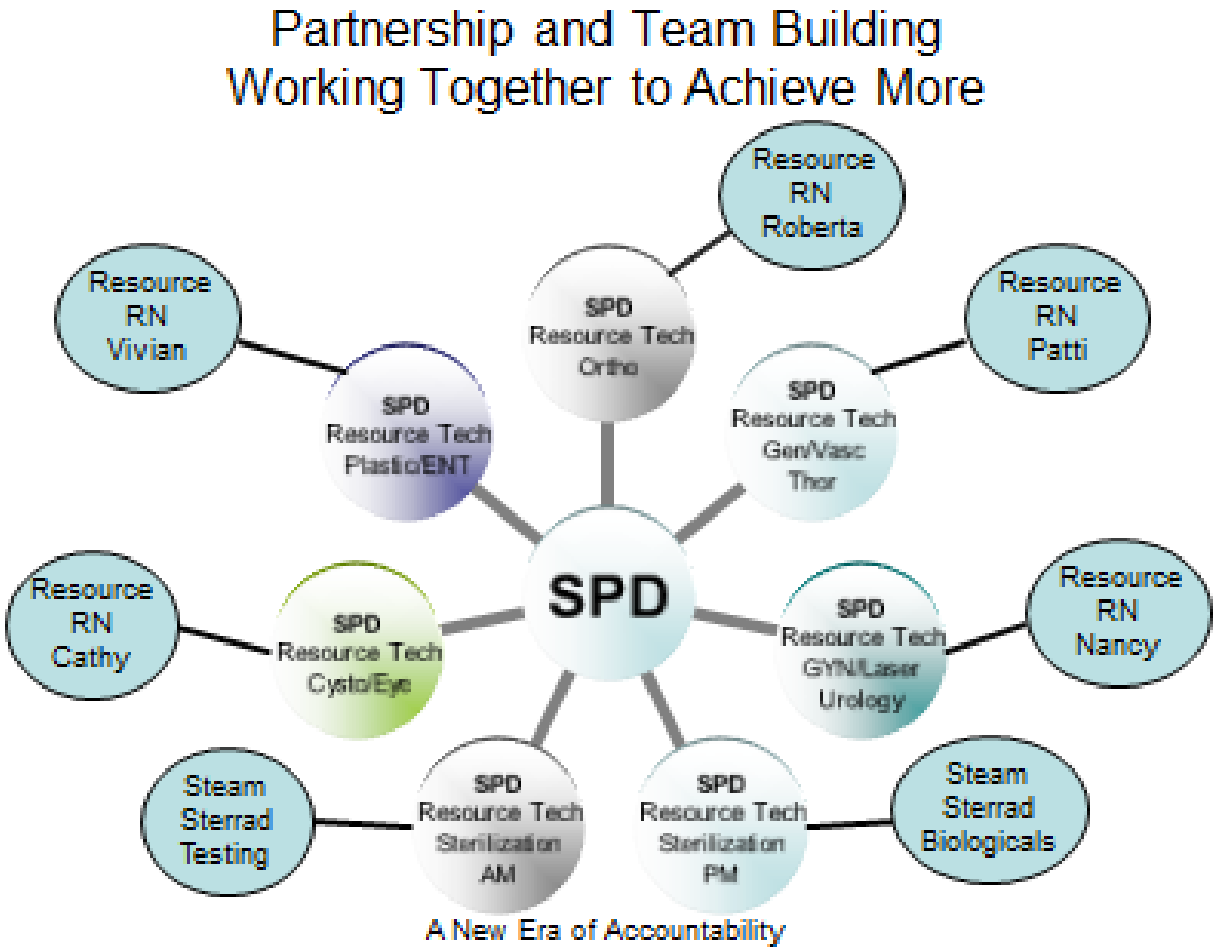
Strategies for Improvement



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Strategies for Improvement

- OR Resource RN and SPD Resource Tech collaborate and communicate:
- Establish flow of equipment for scheduled procedures
- Liaison to reduce repair costs of surgical equipment
- Educate and mentor new staff
- Train staff on new equipment and instrumentation
- Collaborate on back-up OR instrumentation cart needs

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Strategies for Improvement

- Collaborate on missing instruments
- Utilize Ascom phones to improve immediate communication needs

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Strategies for Improvement

SPD Cysto Resource Tech

- Work directly in Cysto room as well as SPD
- Starts point of use care of ensuring instruments and telescopes are handled with care, post procedure
- There has been a great decrease in repair costs
- Is a resource to OR staff and surgeon regarding equipment
- Surgeons don’t like to begin their day until she is there

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Strategies for Improvement

Other SPD Positions

- Monday-Friday Case Cart Coordinator
- Sunday-Thursday SPD/OR night shift shared position
- Monday-Friday 10-6 SPD position, case cart transportation to decontamination

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Strategies for Improvement

Improving the Quality of Surgical Trays/Single wrapped items

- We have developed a quality improvement process to ensure a safer environment for patients and staff
- This process continues to provide SPD with a method to investigate, report and review surgical instrument trays/single wrapped items errors on an ongoing basis
- This allows SPD to look at their processes that are susceptible to errors and make improvements
- The staff will be a part of improving the quality of the department

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Strategies for Improvement

Improving the Quality of Surgical Trays/Single wrapped items

- Work with our customer's one on one and discuss and monitor "trouble trays for their service"
- Enables SPD staff to feel pride in their position to quality patient care

"The key to decreasing errors is making sure everybody understands the bottom line in the patient's outcome"

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Strategies for Improvement

- Two audit tools were developed, in order to monitor errors

Reactive Audit Tool

- Use by OR nursing staff to capture pertinent information of instrumentation errors
- Reactive Audit tool is placed on top each case cart, allowing ease of use for the OR staff
- Once an error is discovered, the tool is filled out and given to the SPD manager via the OR manager

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Improving The Quality Of Surgical Trays:

Date: _____

Name of Tray/Item : _____

O.R. Room #: _____

O.R. Staff Member: _____

Missing Indicator:	**YES / NO**
Hole in Wrapper:	**YES / NO**
Missing Instrument:	**YES / NO**
Dirty Instrument:	**YES / NO**
Broken Instrument:	**YES / NO**
Missing Arrow:	**YES / NO**
Was container properly locked?	**YES / NO**
Did outside label match the Inside?	**YES / NO**
Was case delayed or canceled?	**YES / NO**

Did you give SPD manager or designate the SPD Identification Label? YES / NO

OTHER: _____

_____

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Strategies for Improvement

Proactive Audit Tool

- Use by SPD Resource Techs and Lead Hand to randomly audit completed trays
- Errors are documented using an error tracking tool
- Once an error has been identified, the SPD manager meets with the individual to review, educate and problem solve on errors

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Lakeridge Health Corp SPD

Proactive Audit Errors

Date/Time Sampled:_____

Sampling Location: (Circle One) LHO LHB LHPP

Auditor:_____

Instrument Set Name:_____

Processing Tech Name:_____

QA Error Type	**Yes**	No
Was the ridge container correctly indentified?		
Was the proper sterilization container used ?		
Was the sterilization container properly locked?		
Were the locking arrows in place?		
Was the data card for the sterilization container in placed and signed?		
Was the proper size filter used, and in the proper position?		
Was the proper size blue wrap used to wrap the tray?		
Was the blue wrap free of holes and any other damage?		
Was the tray labelled correctly and signed by staff who completed the tray?		
Was proper sterilization method used for the tray.? Was implant on tray?		
Does the tray have the correct quantity of instruments?		
Are all items in the set functional?		
Are all items in the set visual clean?		
Does the set include a internal chemical indicator?		
Were all items put together in the proper manner (trocar)?		
Was the inside of the tray/container wet (moisture) inside?		
Correct assembly of instrument?		
Single Wrap	**Yes**	No
Was the right size wrap/peel pouch used?		
Does the item included the proper internal chemical indicator?		
Was item assembled properly (Rib spreader)?		
Correct Sterilization Method		
Are all items visual clean?		
Is item functioning properly? (Sharp scissor)		
Comments:		

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Strategies for Improvement

- On a weekly basis the Lead Hand collate the information from the proactive and reactive audits
- Errors and error rates are posted on a visual management board
- Trends are compared and determine how to resolve errors
- The manager has one on one meetings with staff to discuss and coach on errors
- The visual management board is also used as a means to celebrate successes
- Weekly huddles with management to discuss visual management board
- Used at OR staff in-services to share information

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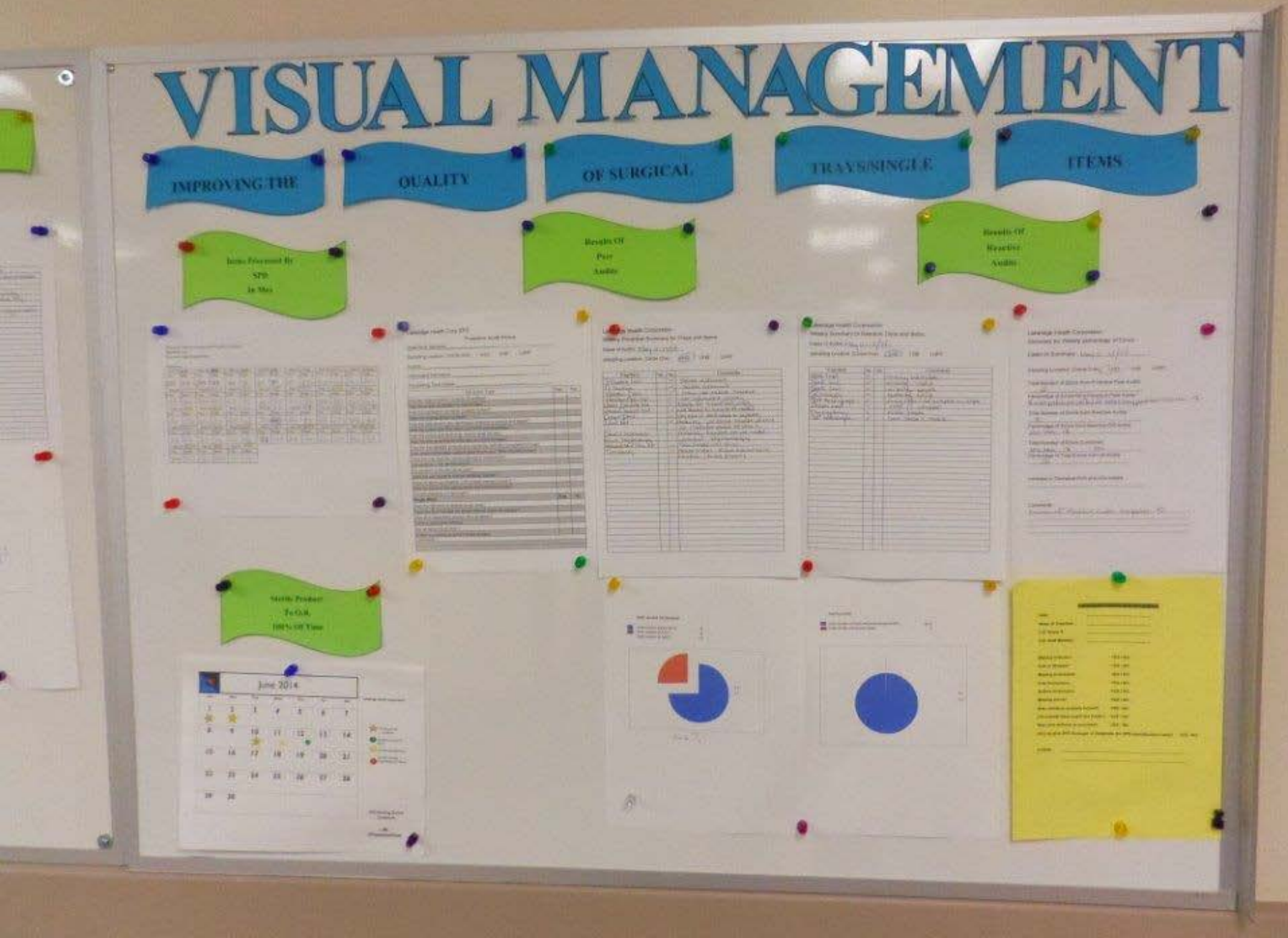
VISUAL MANAGEMENT
IMPROVING THE
QUALITY
OF SURGICAL
TRAYS/SINGLE
ITEMS
Results Of
Peer
Audits
Results Of
Reactive
Audits
June 2014


Results Of
Peer
Audits
Results Of
Reactive
Audits
Results Of
Peer
Audits

Strategies for Improvement

TKA/THA Care of Instruments

- Situation- Contamination of TKA/THA instrumentation occurring more frequently causing delays in cases and impacting patient care
- Background- September 2012, had seen an increase in Better Reports related to TKA/THA instrumentation sterility
- Contamination related to bone, cement, hair and grease like substance found on/in the TKA/THA instrumentation

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Strategies for Improvement

- Assessment- contaminations were mostly related to the T-handle, rod and template of the TKA sets
- Found that OR nurses needed more education on point of use cleaning
- OR nurses not always consistent in handling instrumentation after the procedure i.e. taking instruments apart
- Used instruments were put back into Stryker trays with unused instruments
- Stryker trays are not designed for cleaning and disinfection in the fully equipped state. The devices must be removed from the tray for adequate cleaning results

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Strategies for Improvement

- Reconciliation- SPD is changing their staffing pattern on evenings so that more people can be trained on ortho instrumentation
- Ortho SPD Resource Tech starting double checking the TKA/THA trays (double initial)
- Implementation of TKA/THA instrumentation transportation procedure

Strategies for Improvement

- Sticker to identify TKA and THA case carts so that instrumentation comes to decontamination at one time
- Lead Hand is called when TKA/THA instrumentation comes to decontamination so she can visually inspect how the instrumentation has come from the OR and help decontamination to take instruments apart etc.
- After instrumentation has gone through the washer Ortho SPD Resource Tech inspects

Strategies for Improvement

- Consulted with Stryker to determine the cause of the grease like substance found on the TKA ?design flaw
- Steris evaluated SPD's process to determine if there was any potential areas that contamination could be resulting from the reprocessing

Steris Review

- Steris Transport Gel
- Concern: greasy substance on Inst.
- Discontinue use on all Joint Trays
- Reviewed quantity of lubricant in final phase of wash cycle
- Reviewed process of washing cycle verification to determine if washers were performing to specifications

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Strategies for Improvement

- Using the All Clean Tests-(Washer Indicators)
- Finally we evaluated with Steris instrument challenges that those particular instruments pose to cleaning and sterilization.
- Together we determined there should be additional consideration during the reprocessing of certain devices
- Steris did not find any lapse in our process
- Together we centered the investigation on specific devices and the challenges of the designs to the sterilization process. For these challenges we have made changes

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Strategies for Improvement

- Ensure that staff in OR and SPD have hair properly covered
- SPD wears a hair net in addition to hair covering
- Since the investigation process and implementation of new strategies within the OR and SPD to safeguard against contaminations we have not had any instances of delays related to equipment contaminations

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Strategies for Improvement

Decontamination Audits

- Audits are conducted on instrumentation coming from the OR
- Information and pictures of issues are given to the OR Manager to use to educate OR staff
- OR staff have been educated on how important their role in the vigilance of instrumentation is

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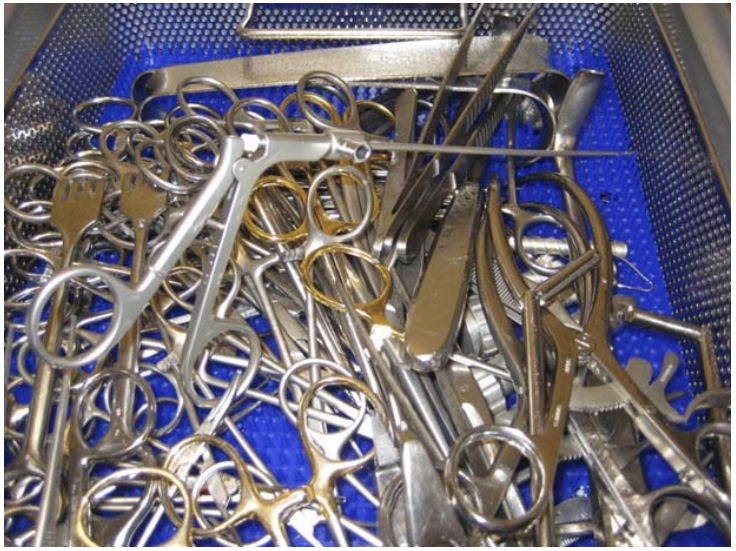
Strategies for Improvement

-Sharps still on tray (skin hooks finger rakes etc.) Please put these items in k-basin beside tray.

-Endo Fascia Closure on top of instruments and sharp end is stuck in basket

-Damaged Instrument!



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Strategies for Improvement

-Harmonic Scalpel entwined with other cords on middle shelf
-Container on top of cords

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Strategies for Improvement

SPD Education Posters

- Pictures of “trouble” instruments are used to help educate SPD staff
- There are some instruments that can be difficult to put together correctly and therefore sent up to the OR wrong
- SPD staff are educated and picture posters are hung in the work area as a resource

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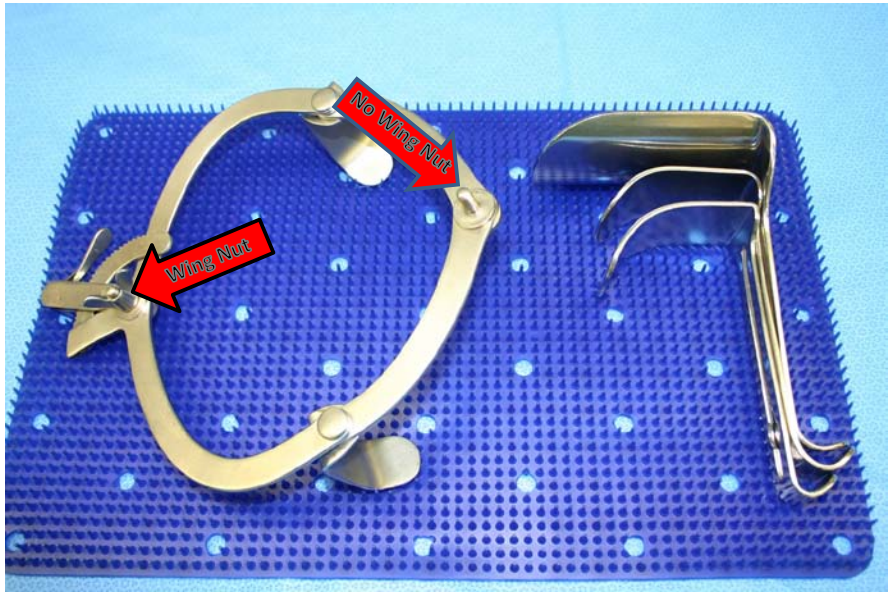
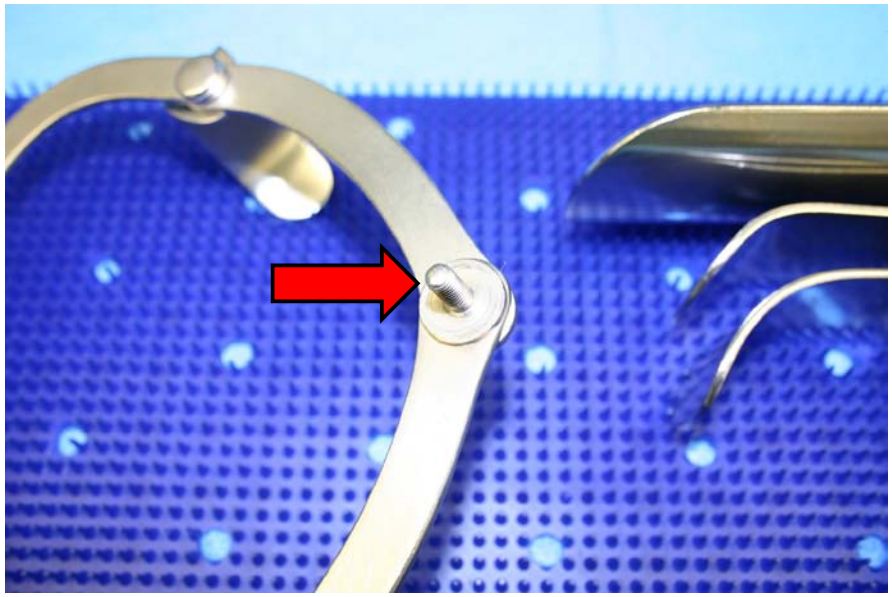
Please make sure the Sullivan O'Connor has both wing nuts when assembling and processing. The O.R received this one missing one of the wing nuts.





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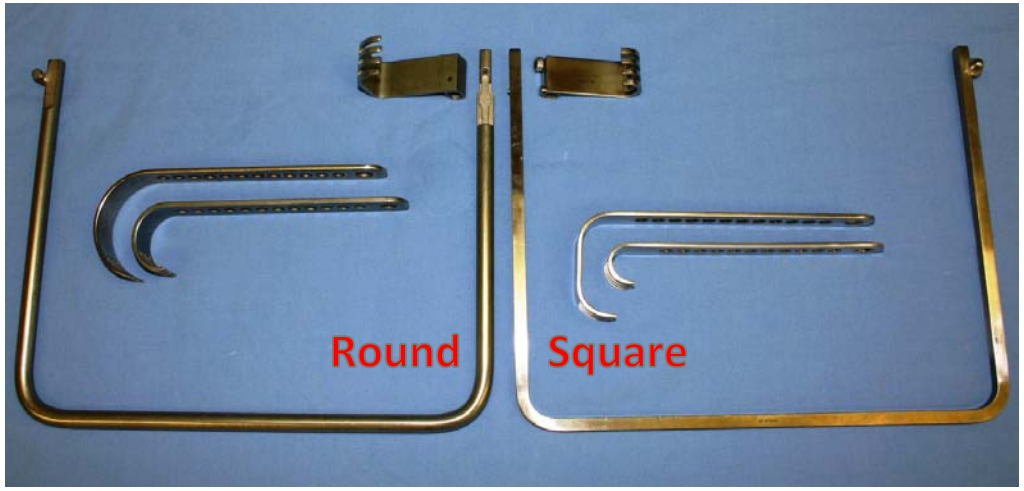
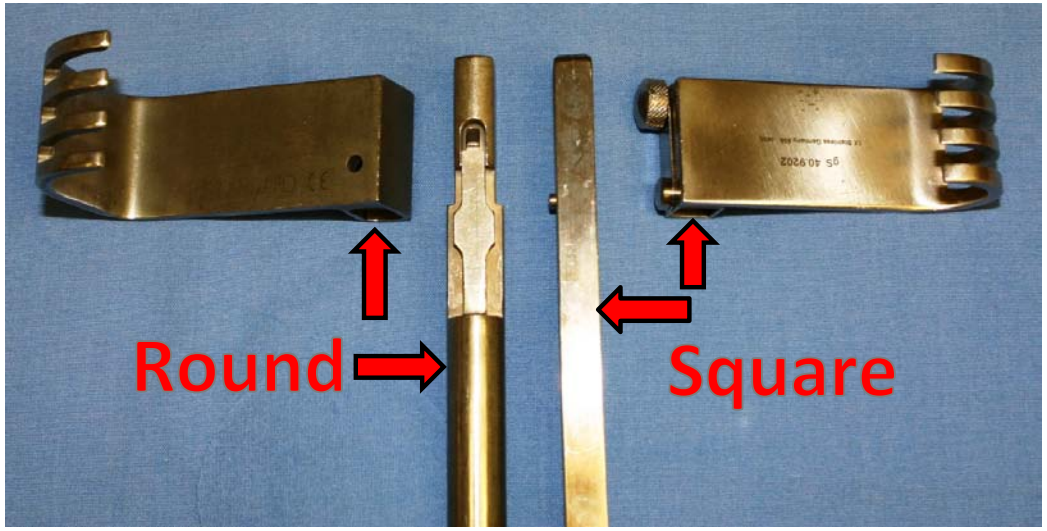
CHARNLEY HIP RETRACTORS





****PLEASE NOTE**** we have two different Charnley Retractors, a round and a square. Please ensure to match the proper retractors to the set. Please refer to pictures to see the difference. If you have any questions please see Jackie.

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Strategies for Improvement

OR/SPD In-services

- SPD Resource Tech's are invited to OR in-services that are related to the services that they are responsible for
- SPD staff have provided in-service to OR staff regarding instrumentation and their "Beware Program" as well as tours of the SPD department and Visual Management board
- SPD staff observe in the Ortho service to better understand how instrumentation is utilized

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Strategies for Improvement

OR/SPD Orientation

- During OR orientation, nursing and support staff spend a day in the SPD department to better understand processes
- SPD orientation consists of 20 weeks through all areas of SPD, time is spent with each SPD Resource Tech
- Successful candidates of SPD Resource Tech positions spend a week orientating in their OR service, this allows surgeons to become familiar with the person responsible for their instrumentation and for the SPD staff to be familiar with OR procedures

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OR/SPD Relations Success!

- Having positive relationships is our greatest success because it gives us the ability to learn and grow from each other
- Eagerness from staff in both departments to collaborate jointly on initiatives that promotes safe patient care
- Strong surgical leadership that embraces the strengths of staff and that promotes a positive team environment

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OR/SPD Relations Success!

- SPD Accreditation Video

http://youtu.be/mL3fmjvRh5o

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Questions?

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