Surgical never events - stand up and be counted!

This will be my penultimate message and I am taking the opportunity to discuss the thing that keeps me motivated, challenged and above all a serving care professional - patient safety in the perioperative environment.

Being President of AfPP has given me the opportunity to discuss the perioperative commitment to safety and to represent the Association at various national forums to ensure our members’ voices are heard. It has also given me the honour of speaking to members directly through the Professional Advisory Service (PAS) or regional study and networking events. Many of these conversations have been about the use of the five steps to safer surgery, the checklist, and various safety issues that present themselves daily within our working lives.

The impending publication of the never events report that was discussed in the webinar broadcast during ‘Safer Surgery Week’ (Patient Safety First 2012), reflects a high proportion of surgical events against the reported incident numbers as a whole. This gives us the opportunity to reflect on the true impact that they should have on our perioperative community. The impacts I keep me motivated, challenged and above all a serving care professional - patient safety in the perioperative environment.

action to drive up standardised practice and receive human factors education, and action that we will not be blamed but become the catalyst for change. We have been given some useful tools (Five Steps to Safer Surgery, NPSA 2010) and we have the skills and knowledge, the support of AfPP’s published standards, and we are advocates for patients receiving perioperative care.

Recent published feedback in various forms regarding the use of the checklist make uncomfortable, but never surprising, reading. However, I think I have read enough now, haven’t you? Therefore, we must not tolerate individuals who seek to disrupt the process, we must not accept colleagues that fall short of the expected standards of practice and we must not let our voices be unheard in our places of work where ‘never events’ are continuing to happen. Our organisational leaders want a quality outcome for patients too and a good leadership listens!

Ticking boxes on countless pieces of documentation is never a substitute for professionally challenging and respectful crucial conversations, a respect for organisational policies, evidence based practice, clinical expertise and education.

We have the influence and power within us all however our age, experience, gender or culture if we work as an effective perioperative team with a shared focus when a patient is undergoing surgical intervention. We need, as specialty professionals, to act as the role models for surgical intervention, wherever it happens in our organisations, and reduce the risk for patients. It’s our responsibility.

References


Further Reading

FURTHER READING

FROM THE PRESIDENT

ADVISORY SERVICE

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