



Service Priorities and Programmes
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Perioperative Prone Positioning Safety Program

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Introduction

Prone positioning is a common, but complicated position using in the operating theatre. There are 5 incidents identified from 2010 Jan to 2012 Mar, in the operating theatre of Prince of Wales Hospital. A root cause analysis is being used to identify the factors related to these kinds of accidents. Knowledge reinforcement and assessment tools development are essential to prevent these incidents.

Objectives

Education Program and the checklist are commenced for performing prone positioning in the operating theatre, which can reduce related incidents.

Methodology

In order to realize the colleagues about the knowledge of 'Prone- Positioning', we had designed the pre-questionnaire of Prone Positioning to assess their understanding level. According to the pre-questionnaire returned, less than 30% familiarized with the procedure using the appropriated positioning devices and did not realize the risk point during performing it. Based on the finding, we have developed nursing recommended practices for all patients that would undergo surgical procedures adopting prone positioning in the operating theatre. To enhance the knowledge related to prone positioning, an education program was commenced in March 2012. Five identical sessions were held within a week. 68% of nursing staff working in the operating theatre have attended the program. To develop an effective assessment and documentation tool for prone positioning, a checklist for prone positioning was developed, with items including pre-operative preparation, intra-operative monitoring and post-operative review. The completed checklists were collected.

Result

RESULT During the 6-month trial period, there were nil incidents reported related to prone positioning during the trial period, as compared with 5 incidences in six months before the checklist implementation. At six months of trial period, all the collected

checklists were reviewed. There were 62 surgeries with prone positioning done, 45 (73%) completed checklists were collected. The competence on filling in the checklist was very satisfactory as the form was completely finished as 98% in a whole. A nurse satisfactory survey was also conducted. Qualitative descriptive theory was utilized to analyze the data. Effectiveness of the checklist and nurses' feedback were evaluated. 90 nurses working in the operating theatre were sent a questionnaire for the nurse satisfactory survey, 42 returned (response rate = 47%). All respondents advocated that the checklist was useful for training, in particular for those who were not familiar with performing prone positioning. 38 (90.4 %) of the respondents indicated that the checklist standardized the process of prone positioning and review, and 35 (83.3 %) agreed that it improved patient safety. **CONCLUSION** The Perioperative Safety Program and the checklist are useful for performing prone positioning in the operating theatre. It helps in improving patient safety.