

To Study the Existing System of Surgical Safety for Cataract Surgery at Tertiary Care Ophthalmic Centre to Implement Who Surgical Safety Checklist

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Abstract : Background: Dr. Rajendra Prasad Centre for Ophthalmic Sciences, named after the first President of India, was established on the 10th of March, 1967 as a National Center for ophthalmic science to provide state-of-the-art patient care, expand human resources for medical education and undertake research to find solutions to eye health problems of national importance. The average number of cataract surgeries performed per month is 700 to 1000. Methods: Anticipating implementation in 50% cases hundred cases of cataract surgery were observed to study the existing system of surgical safety followed at Dr. R.P. Center and gap analysis done against the WHO surgical safety checklist for cataract surgery. A modified WHO surgical safety checklist for cataract surgery was developed and implemented in the center. Barriers in the implementation of the surgical safety checklist were also identified, and remedial measures were suggested. Results: Significant improvement was noticed in all the parameters after the introduction of the modified checklist. The additional points which were added in the modified surgical safety checklist were implemented in almost all the cases by the nursing staff. The overall mean compliance percentage before the implementation of the modified surgical safety checklist at Dr. R.P.C was $37\% \pm 10.1$ ($P=0.001$). While after the introduction of the modified surgical safety checklist, the mean compliance has improved to $62.7\% \pm 10.3$; the Wilcoxon rank sum test/Independent test is applied for each domain. Conclusions: The cataract procedure is the most common surgical procedure performed in the population in India. High volume and high turnover increase the potential for errors. Compliance with the surgical safety checklist before intervention was 32%. After intervention in the form of a focus group discussion and introduction of a modified surgical safety checklist has resulted in an increase in the compliance rate to 67%, this study revealed that changes or additional work are not happily accepted by the staff. After six months of intervention with the modified surgical safety checklist compliance rate was still high, this suggests that constant supervision and monitoring by senior staff can sustain the compliance rate.

Keywords : patient safety, hospital safety, quality, WHO surgical safety checklist

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