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Activities for performing accurate and safe invasive procedures

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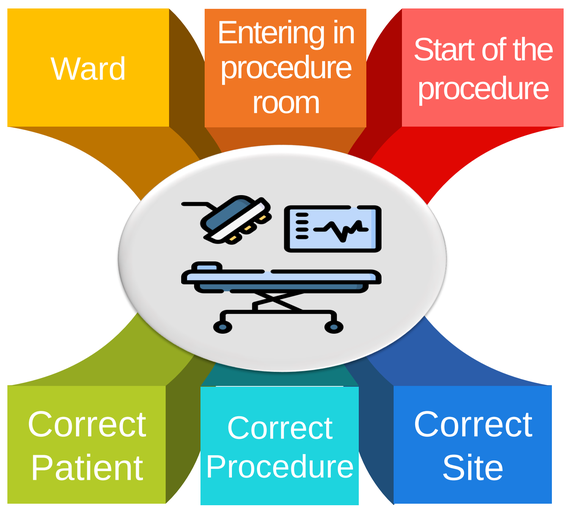
1. Introduction

The hospital has developed and implemented a comprehensive process to ensure the safety of the patients and the accuracy of invasive procedures. Boramae Medical Center took a significant step in 2015 by establishing a procedure verification process and developing an invasive procedure safety checklist. As the importance of patient safety continues to be a priority, numerous guidelines* on the procedure verification process have been published. In light of recent guidelines, it is crucial to regularly review and modify the verification process to align with the latest recommendations and standards.

* patient safety warnings provided by the Korea Patient Safety Reporting Learning System and the 4th Edition Accreditation Standard for Healthcare Organizations by the Korea Occupational Safety and Health Agency(KOIHA)



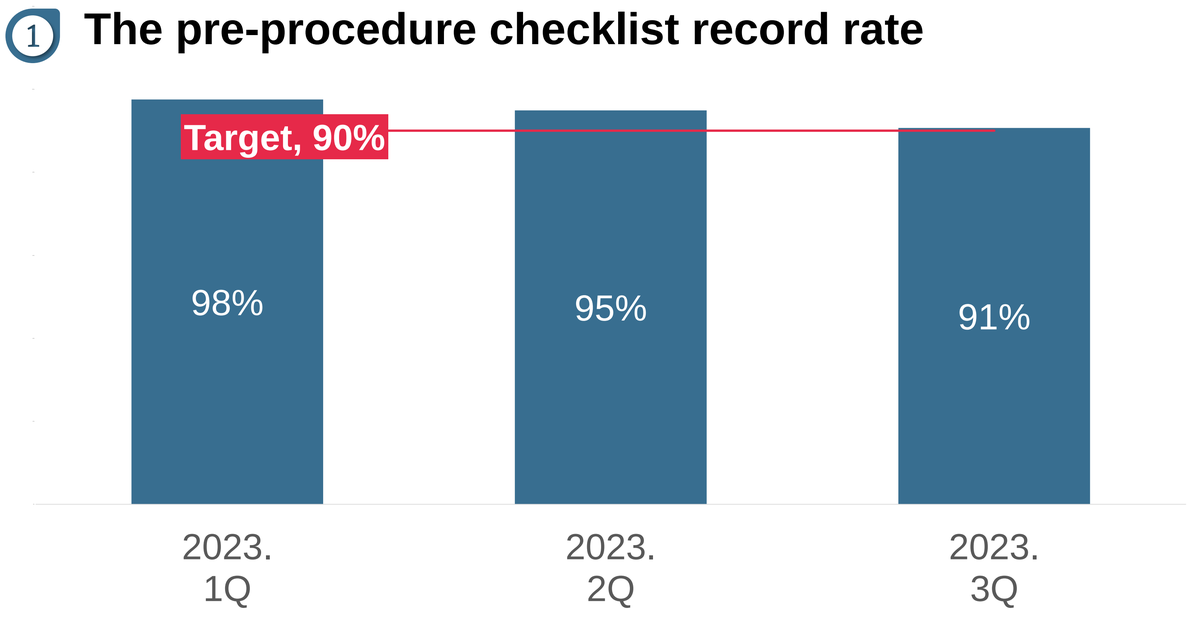
2. Methods

1. The scope of invasive procedures was reconfirmed.
2. The principle of marking the procedure site has been re-established.
   - Bilateral organs, multiple structures, and multi-level sites are marked on the skin.
   - A single structure or a site not predetermined in advance is not marked on the skin.
3. The procedure safety checklist was revised.
   - Added columns to confirm the accuracy of all relevant documents, images, and studies, verify the availability of required blood products, and facilitate communication between the ward and the procedure room.
4. A standard time-out scenario for the procedure room was developed.
5. A pilot monitoring was conducted as a standardized scenario.
6. The step-by-step procedure verification performance was managed as two clinical indicators regularly.
   - The pre-procedure checklist record rate, Time-out implement rate
7. The results of the clinical indicators were shared with employees and reported to the leadership team.

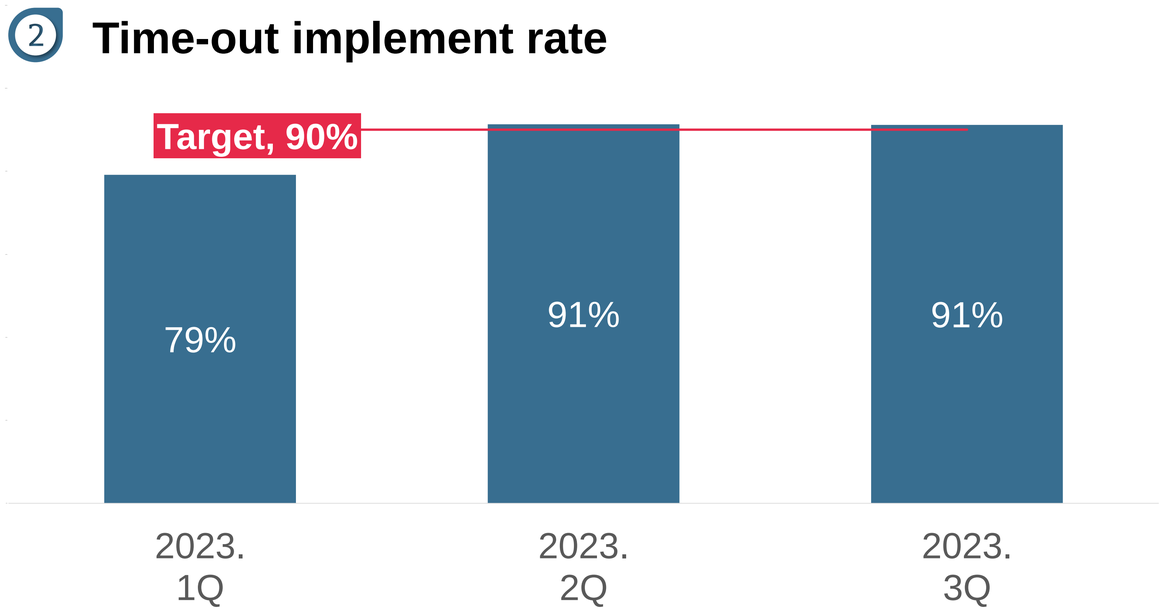
3. Results

Hospital regulations were revised and implemented in January 2023. A new procedure safety checklist program was launched in the same month. The procedure checklist record rate was consistently above 90% throughout the project. However, the time-out implement rate in the 1st quarter was below 90%. Consequently, improvement activities were initiated, including re-informing employees about the timeout scenario and attaching scenarios to each room. Subsequently, the rate exceeded 90% in the 2nd quarter and 3rd quarter.

1 The pre-procedure checklist record rate



2 Time-out implement rate



4. Conclusions

Hospitals should endeavor to prevent potential issues arising from the incorrect identification of procedures. They develop a procedure verification process along with corresponding regulations and support their employees in adhering to these guidelines. This is not a one-time activity but requires sustained interest and effort for ongoing effectiveness.

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